



State of Rhode Island
Department of State - Business Services Division

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2021 MAY -4 PM 3:18

Annual Report for the year: 2020
 Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 001672289		2. Exact name of the Limited Liability Company Triple S Construction LLC			
3. NAICS Code 238160		4. Brief description of the character of business conducted in Rhode Island All phases of construction mainly roofing + siding			
5. State of Formation RI					
6. Principal Office Address 19 Washburn Ave		City Rumford	State RI	Zip 02916	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Sheridan Decristoforo			Contact Title owner		
Street Address 19 Washburn Ave		City Rumford	State RI	Zip 02916	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Sheridan Decristoforo		Manager Name			
Street Address 19 Washburn Ave		Street Address			
City Rumford	State RI	Zip 02916	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person Sheridan Decristoforo				Date 5/29/21	
Signature of Authorized Person <i>Sheridan Decristoforo</i>					

MAIL TO:
 Division of Business Services
 148 W River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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JUN 4 2021

BY *[Signature]* FW43W

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