State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year: 2021
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	2. Exact name of the Limited Liability Company		
127269	**TAXPLUS, LLC**		
3. NAICS Code 812990	4. Brief description of the character of business conducted in Rhode Island TAX SERVICES		
5. State of Formation RHODE ISLAND			
6. Principal Office Address 861 RESERVOIR AVENUE	City CRANSTON	State RI	Zip 02910

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title		
ELVIS SENA	MANAGER		
Street Address 861 RESERVOIR AVENUE	City CRANSTON	State RI	Zip 02910

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name			Manager Name		
ELVIS SENA					
Street Address 861 RESERVOIR AVENUE			Street Address		
City CRANSTON	State RI	Zip 02910	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

Check the box to indicate an attachment ☐

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	Date
ELVIS M. SENA	07/03/2021
Signature of Authorized Person	

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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FORM 632 - Revised: 08/2020