



State of Rhode Island
 Department of State - Business Services Division

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.

STATE
 FILED
 SEP 30 2021
 BY 1492

1. Entity ID Number 000127803		2. Exact name of the Limited Liability Company KOALCO, LLC			
3 NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE			
5. State of Formation RHODE ISLAND					
6 Principal Office Address 141 POWER ROAD		City PAWTUCKET	State RI	Zip 02860	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MANUEL C. PONTE III			Contact Title MEMBER		
Street Address 141 POWER ROAD		City PAWTUCKET	State RI	Zip 02860	
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	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.					
<i>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.</i>					
Name of Authorized Person MANUEL C. PONTE III			Date 09/01/2021		
Signature of Authorized Person 					

MAIL TO:
 Division of Business Services
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