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R.I. DEPT. OF STATE

BUS SVCS DIV

2022 APR 20 P 12: 44

Annual Report for the year: 2022 Limited Liability Company

- -> Filing period: February 1 May 1
- → Filing Fee: \$50.00
- -> Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number	2 Exact name of the Limited Lie	hilihi Company			
· ·	2. Exact name of the Limited Liability Company				
001 680 845	ANNISTON CEASING CCC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531120	REAL ESTATE DE VELOPMENT				
5. State of Formation					
rt					
6. Principal Office Address		City	State	Zip	
Pobox 28216		Prov	RI	02708	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Ann MARIE DECOSTA		Contact Title S=CC=TULRY			
Street Address PU NOK 28521		City Price	State	2ip D2903	
8. 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	Date	
LAWRENCE E DECRISTUATION		4/20/22			
Signature of Authorized Person					

12:47

FILED

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov APR 2 0 2022 BV NNG7C 6