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	State of Rhode Island
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Department of State - Business Services Division

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Annual Report for the year: 2018

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 001657600	2. Exact name of the Limited Liability Company A ACTION APPLIANCE REPAIR LLC					
3. NAICS Code 811490	4. Brief description of the cha	Brief description of the character of business conducted in Rhode Island				
5. State of Formation CT	APPLIANCE REPAIR	APPLIANCE REPAIR				
6. Principal Office Address 379 EAST CENTER STREET		City MANCHESTER	State	Zip 06040		
7. Mailing Address of Limite	d Liability Company and Name or I	Title of Contact Person		<u></u>		
Contact Name JON JAY MISKIN		Contact Title PRESIDENT				
Street Address 39 WOODDUCK FARMS ROAD		City WINDSOR	State CT	^{Zip} 06095		
8. The Resident Agent infor	mation currently of record with the f	RI Department of State is accura	te. Changes require			
Under penalty of perjury, I	declare and affirm that I have ex atements contained herein are tr	camined this report, including a	any accompanying	schedules and		
Name of Authorized Person JON JAY MISKIN			Date 8-16-2022			
Signature of Authorized Pers	son	<u>.</u>				

FILED

JAN 09 2023

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov BY 12W7B 3:37 Dt