State of Rhode Island Fee: \$50.00
Office of the Secretary of State
Division Of Business Services
148 W. River Street
Providence RI 02904-2615 (401) 222-3040
Limited Liability Company
Annual Report Filing Period: February 1 - May 1
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024
1. ID No. <u>000160777</u>
2. Exact Name of the Limited Liability Company <u>CROSSCOM NATIONAL, LLC</u>
3. State of Formation
State: <u>DE</u>
NAICS CODE
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.
<u>541990</u>
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
CROSSCOM NATIONAL PERFORMS LOW VOLTAGE CABLING, SERVICE AND
MAINTENANCE OF
VOICE AND DATA EQUIPMENT PRIMARILY IN RETAIL STORES
5. Principal Office Address
No. and Street: 900 DEERFIELD PARKWAY
City or Town: BUFFALO GROVE State: IL Zip: 60089 Country: USA
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:
Contact Name: LAURA KOZICKI Contact Title: AGENT
No. and Street:7040 W 107TH STCity or Town:WORTHState: ILZip: 60482Country: USA

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE , RI 02914

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 1 Day of April, 2024 at 11:02:58 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MARY FITZGERALD

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved