



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

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. 001762957

2. Exact Name of the Limited Liability Company BORE RESTORE LLC

3. State of Formation

State: RI

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

811310

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

LINE BORING AND WELDING REPAIR OF HEAVY EQUIPMENT AND OTHER EQUIPMENT USING PINS AND BUSHINGS AND ROTATING CONNECTIONS. THE PRECISION MACHINING AND INSIDE DIAMETER WELDING AND BORING TO RETURN BORES TO CIRCULARITY AND SIZING FOR PRESS FIT BUSHINGS AND NON ROTATIONAL PIN FIT. PRIMARILY ENGAGED IN THE BORE REPAIR OF EXCAVATORS, FRONT END LOADERS, EARTH MOVING BUCKET PIN EAR BORES AND OTHER.

5. Principal Office Address

No. and Street: 2 QUIDNICK STREET

City or Town: COVENTRY

State: RI

Zip: 02816

Country: USA

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

Contact Name: ERIC GAGNON Contact Title: PRESIDENT
No. and Street: 7 ACORN STREET
City or Town: COVENTRY State: RI Zip: 02816 Country: USA

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

SUZANNE GAGNON 7 ACORN STREET COVENTRY , RI 02816

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

Signed this 10 Day of June, 2024 at 7:50:18 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 ERIC GAGNON
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2024 State of Rhode Island
All Rights Reserved