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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2020 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.

					
Entity ID Number	2. Exact name of the Limited Liability Company				
000797245	J.C. MWFRED, CONTRACTOR, WC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
238100	CONCRETE GORN & EXCANATION				
5. State of Formation					
R		·			
6. Principal Office Address		City	State	Zip	
38 DUNIS WENTS RUND		WESTERM	14	0291	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Contact Title					
JOHN MANFIETD)		PRESIDENT/MEMBER			
Street Address 36 Dunnes Con	wees for	WE STEPLY	S:ate	02 29 1	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642					
9 Under penalty of parjury, I declare and affirm that I have examined this report, including any accompanying schedules aid statements, and that all statements contained herein are true and correct.					
Name of Authorized Person			Date		
John Manfre	· · · · · · · · · · · · · · · · · · ·	12-1	7-24		
Signature of Authorized Person					
John Mankedo					

FILED 1:29

DEC 17 2024

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov