

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 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.

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1. Entity ID Number 109547	2. Exact name of the Limited Liability Company (C) APC (1-24) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2				
3. NAICS Code 3. 3930 5. State of Formation	4. Brief description of the character Panting	ter of business conducted in Rhoo	<u> </u>		
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6. Principal Office Address 100 Mwn+ (leasant tre.	provduce	State	zip OD GOK	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title	-		
Ramon Telemaco Adames		Owner			
Street Address 100 Munt Pleasant Me.		Providence	State 12+	2ip 02908	
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 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		
Ramon Telemaco Adames					
Signature of Authorized Person Camon Lelemoco chamf					

MAIL TO:

Division of Business Services

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

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