

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2013

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 128995	1	2. Exact name of the limited liability company AMERICAN SAFE & LOCK, LLC					
3. State of Formation	4. Brief descrip	4. Brief description of the character of business conducted in Rhode Island To own and operate a safe and lock sales and repair business					
Rhode Island	To own an						
5. Principal office address 117 North Main Street	rth Main Street		City Providence	State RI	Zip 02903		
8. MAILING ADDRESS OF LIM	(TED LIABILITY	COMPANY AND	NAME OR TITLE OF CONTACT P	ERSON:			
Contact Name Milton F. Wolferseder	······································			Contact Title			
Street Address 117 North Main Street			City Providence	State RI	Zip 02903		
7. LIST ALL MANAGERS (NAI "X" BOX FOR ATTACHMEN	MES AND ADDRE	SSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - DO	NOT LIST MEMBERS		
Manager Name		Manager Name	Manager Name				
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name	Name		Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT IN RHOL	EISLAND				The state of the s		
This information is currently o	of record in the C	office of the Seco	etary of State. Changes require f	iling Form 642.			

File Date	FILED	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statemer and that all statements contained herein are true and correct.	
Check No.	SEP 0 9 2013	Signature of Authorized Person Date	1/3
FOR SECRETARY OF STATE USE ONLY	3/27	Milton F. Wolferseder	
		Print or Type Name of Authorized Person	

Form No. 632 Revised: 01/2012