

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018
Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

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1. Entity ID Number 794772		2. Exact name of the Limited Liability Company YOGA CONCEPTS				
3. NAICS Code 713940 5. State of Formation RI		Brief description of the character of business conducted in Rhode Island YOGA INSTRUCTION				
6. Principal Office Address 1150 Pontiac Avenue, Rear Unit			City Cranston	State RI	Z _I p 02920	
7. Mailing Address of Limit		any and Name o				
Contact Name Mary Ann Nassa			Contact Title Owner			
Street Address 1150 Pontiac Avenue, Rear Unit			City Cranston	State RI	Z _{IP} 02920	
	mes and addresses	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
		<u> </u>		Check the box to	indicate an attachment	
9. Resident Agent in Rhod	e Island. This inform	nation is currently	of record with the Department of S	tate. Changes require fili	ng Form 642.	
Under penalty of perjury, statements, and that all			examined this report, includi true and correct.	ng any accompanyin	ng schedules and	
Name of Authorized Person				Date	Date	
Mary Ann Nassa				Septen	September 10, 2018	
Signature of Authorized Re Mby (1.)	\ <i>Z</i> }	SIG	N DOCUMENT HERE			

MAIL TO:

Division of Business Services

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

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

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FORM 632 - Revised: 10/2017