RI SOS Filing Number: 202051353270 Date: 9/1/2020 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

## Annual Report for the year. 2020 Limited Liability Company

-> Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

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1. Entity ID Number 1676699		2. Exact name of the Limited Liability Company Krista Perry Pilates, LLC					
3. NAICS Code 713940	4. Brief desc Pilates fitnes	Brief description of the character of business conducted in Rhode Island Pilates fitness instruction					
5. State of Formation RI							
6. Principal Office Address			City	State	Zip		
71 Countryside Drive			Cumberland	RI	02864		
7. Mailing Address of Limite	d Liability Compan	y and Name or Tit	ie of Contact Person		<del></del>		
Contact Name Krista Perry			Contact Title Manager				
Street Address 71 Countryside Drive			City Cumberland	State RI	Zip 02864		
8. List ALL managers (nam	nes and addresses	) of the Limited Lia	bility Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name Krista Perry			Manager Name				
Street Address 71 Contryside Drive		Street Address					
City Cumberland	State RI	Zip 02864	City	State	Ζþ		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
				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 Si				
Under penalty of perjury statements, and that all	, I declare and affi	irm that I have ex	amined this report, includi	ng any accompanyi	ng schedules and		
Name of Authorized Person				Date	\d		
Krista Perry					124/20		
Signature of Authorized P	erson Kaisi	to Jac	POSUMENT HERE				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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