

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

FILED

Annual Report for the year: 2020 Limited Liability Company

MAR 1 9 2021

BY 2 27067850853

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

Entity ID Number	2. Exact name of the Limited Liability Company				
1686163	JOYERIA ITALIA LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
448310	SALES OF JEWERLY AND REPAIR				
5. State of Formation	1				
RHODE ISLAND					
6. Principal Office Address			City	State	Zip
945 BROAD ST			PROVIDENCE	RI	02907
7. Mailing Address of Limited Lial	bility Compar	y and Name or	Title of Contact Person		
Contact Name GLEIDY VALENZUELA DE PIMENTEL			Contact Title OWNER		
Street Address 945 BROAD ST			City PROVIDENCE	State RI	<sup>Z<sub>1</sub>p</sup> 02907
8. List ALL managers (names an	d addresses)	of the Limited L	iability Company, IF APPLICABL	E - DO NOT LIST I	MEMBERS
Manager Name			Manager Name		
Street Address			Street Address		
C.ty .	State	Zıp	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
C ty	State	Zip	City	State	Zip
				Check the box to it	ndicate an attachment [
9. The Resident Agent information	n currently of	record with the	RI Department of State is accura	ite. Changes require	filing Form 642
Under penalty of perjury, I decli statements, and that all stateme	are and affiri	m that I have or	camined this report, including	any accompanyin	g schedules and
Name of Authorized Person				Date	
GLAIDY VALENZUELA DE PIMENTEL				02/10/2021	
Signature of Authorized Person		<u> </u>			· <del>-</del>
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## MAIL TO:

**Division of Business Services** 

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