

R.I. DEPT. OF STATE BUS SYCS DIV 1. 2022 DEC -5 PM 4: 08

Annual Report for the year: Limited Liability Company

2023

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number	2. Exact name of the Limited Lia			
000 79 7-761	KAPOSO E	NGINEERINGID	NSULTI	ING UC
3. NAICS Code 54/330		cter of business conducted in Rhoo		Epulaes
5. State of Formation MASSACHO			77	
6. Principal Office Address	<i>'</i>	City	State	Zip 02793
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name	PAPOSO	Contact Title	ne Ch	VHER
Street Aderess 4 7/1	A LU	City WEST PORT	State	Zip 02790
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
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	so KAPOR		Date 15/13	3/2022
Signature of Authorized Person	ho Topen	•		/
// /	/			

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

DEC 2 3 2022 P.A. 12: AUPM. RECEIVED
RECEIVED
RECEIVED
RECEIVED
RECEIVED
RECEIVED
RECEIVED
RECEIVED
RECEIVED

FORM 632 - Revised: 11/2021