RI SOS Filing Number: 202327430610 Date: 2/2/2023 4:00:00 PM



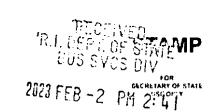
State of Rhode Island

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

## Annual Report for the year: $\frac{2023}{}$ **Limited Liability Company**

→ 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 000791029	2. Exact name of the Limited Liability Company ANNEXTEES, LLC  4. Brief description of the character of business conducted in Rhode Island Retail sales			
3. NAICS Code 448140				
5. State of Formation RI				
6. Principal Office Address		City	State	Zip
154 Thames Street		Newport	RI	02840
7. Mailing Address of Limite	ed Liability Company and Name	or Title of Contact Person		<del></del>
Contact Name		Contact Title		
Street Address 154 Thames Street		City Newport	State RI	<sup>Zip</sup> 02840
8. The Resident Agent infor	mation currently of record with	the RI Department of State is acc	urate. Changes require	e filing Form 642.
	I declare and affirm that I hav tatements contained herein a	re examined this report, includir re true and correct.	ng any accompanyin	g schedules and
Name of Authorized Person			Date /	
Joseph R. Marion III			1/3//73	
Signature of Authorized Per	rson		•	

FILED

MAIL TO:

**Division of Business Services** 

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

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