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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: ___ Limited Liability Company

2023

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2023 FEB 13 P 3: 00

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

Entity ID Number 2. Exact name of the Limited Liability Company				
001664728	1		CONSTRUC	DIJ MOIT
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
726118		\bigcap		
5. State of Formation	Building	& Design	,	
RE	<u> </u>			
6. Principal Office Address	\	City	State	Zip
570 Boad St.		Youdence	P.	02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Maria Rosa Takuma Contact Title				
Street Address 25 85 Dkamo	WILH EN	cincumberland	State	5ip 05861
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			Date	
MARIA ROSA TAKUMA			FEB	13 2023
Signature of Authorized Petson				
a for the time				

FILED

FEB **1 3** 2023

BY ML CSZI

MAIL TO:

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

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