RI SOS Filing Number: 202329230470 Date: 2/23/2023 4:00:00 PM

State of Rhode Island				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ate - Business Services	s Division		
Annual Report for the year: 2023			FILED	
Limited Liability Company			FEB 2 3 2023	
→ Filing period: February 1 - May 1			71171	
→ Filing Fee: \$50.00			BY YG'	
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.				20
Entity ID Number	2. Exact name of the Limited Liability Company			
001749162	SUN SPA	9, 166		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island MASS AGE PARLOR AND ANY OTHER			
812191	MASSAGE	PARLOR AND	ANY	OMER
5. State of Formation	MONEUL	PURPOSE.		
AP	2/9.00.			
6. Principal Office Address		City DROVIDENCE	State	Zip
1021 BRUAD ST		DROVID KNCK	NI	02905
7. Mailing Address of Limited Lia	bility Company and Name or Title	of Contact Person	**	
Contact Name HTE CHONG PARK		Contact Title OWNER State PLE Zip 02 9.05		
Street Address 1 BROAD ST.		City PROVIDENCE	State 194	Zip 029.05
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
	lare and affirm that I have exan nents contained herein are true	nined this report, including any a and correct.	ccompanying s	chedules and
Name of Authorized Person			Date	. /
Signature of Authorized Person				12023
Signature of Authorized Person				

MAIL TO:

Division of Business Services

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

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