



State of Rhode Island
Department of State - Business Services Division

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R.I. DEPT. OF STATE
BUS SVCS DIV

2023 AUG -2 P 12: 09

Annual Report for the year: 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 <u>001749833</u>		2. Exact name of the Limited Liability Company <u>A Sabetta Imagination LLC</u>	
3. NAICS Code <u>454110</u>		4. Brief description of the character of business conducted in Rhode Island <u>ONLINE SALES</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>1 Greenview Ct.</u>		City <u>Johnston</u>	State <u>RI</u>
		Zip <u>02919</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Thomas F. Sabetta</u>		Contact Title	
Street Address <u>1 Greenview Ct.</u>		City <u>Johnston</u>	State <u>RI</u>
		Zip <u>02919</u>	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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 <u>Thomas F. Sabetta</u>		Date <u>8-2-2023</u>	
Signature of Authorized Person 			

MB FILED 1209
AUG 02 2023
BY M6F9R

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