



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Limited Liability Company

2024

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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BUS SVCS DIV

2024 JAN - 2 P 12:07

1. Entity ID Number 1676699		2. Exact name of the Limited Liability Company Krista Perry Pilates, LLC	
3. NAICS Code 713940		4. Brief description of the character of business conducted in Rhode Island Pilates	
5. State of Formation RI			
6. Principal Office Address 71 Countryside Drive		City Cumberland	State RI
			Zip 02864
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Krista Perry		Contact Title owner / manager	
Street Address 71 COUNTRYSIDE Drive		City Cumberland	State RI
			Zip 02864
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 Kevin A. Perry			Date 1/2/2024
Signature of Authorized Person 			

FILED 1211

JAN - 2 2024
BY 7XYNC

MAIL TO:

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