



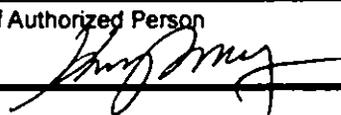
**State of Rhode Island
Department of State - Business Services Division**

Annual Report for the year: 2023
Limited Liability Company

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

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

2024 JAN - 2 P 12:07

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

VS FILED 1210
JAN - 2 2024
BY TX YNC

MAIL TO:
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