



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Limited Liability Company

2022

- 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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|---|--|--|------------------|
| 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 1/2024

JAN - 2 2024

BY TXVNC

MAIL TO:

Division of Business Services
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