



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Limited Liability Company

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BUS SVCS DIV

2024 JAN 18 P 3:51

- 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 000920606		2. Exact name of the Limited Liability Company Maria DeCarvalho, LLC	
3. NAICS Code 611430		4. Brief description of the character of business conducted in Rhode Island Business consulting Service	
5. State of Formation RI			
6. Principal Office Address 18 Vassar Avenue		City Providence	State RI Zip 02906
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Susan O'Shea		Contact Title Bookkeeper	
Street Address 18 Belmont Street		City Pawtucket	State RI Zip 02860
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 Susan O'Shea		Date 1/18/24	
Signature of Authorized Person Susan O'Shea			

FILED 3:52

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MAIL TO:
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