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

Annual Report for the year: ____ ಇರ್ನಿ । **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.

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SECRETARY OF STATE
2024 JAN 19 A 9: 36

1. Entity ID Number	2. Exact name of the Limited Liability Company				
i_j0010 99993	Ancher Cement and Construction, U.C.				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
238110	Cement flatwork				
5. State of Formation	Mosonry				
RI	·				
6. Principal Office Address	•	City	State	Zip	
9 Ja St		Pie Johnsten	RI	02919	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Heidi Jimenez		Portnes			
Street Address		City	State	Zıp	
20 (graview Drive		Providence	<u>rr</u>	02910	
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			Date		
tkidi Imenez			1/19/24		
Signature of Authorized Person					

JAN 19 2024 BY 54456

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov