



State of Rhode Island
Department of State - Business Services Division


Annual Report for the year: 2024
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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BUS SVCS DIV

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1. Entity ID Number <u>1764940</u>	2. Exact name of the Limited Liability Company <u>Villa Construction LLC</u>		
3. NAICS Code <u>238130</u>	4. Brief description of the character of business conducted in Rhode Island <u>Framing</u>		
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>169 Grant St Apt 2</u>		City <u>Fall River</u>	State <u>MA</u>
Zip <u>02721</u>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Manuel Cesar Villa</u>		Contact Title	
Street Address <u>169 Grant St</u>		City <u>Fall River</u>	State <u>MA</u>
Zip <u>02721</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>Manuel Cesar Villa</u>			Date <u>01/26/24</u>
Signature of Authorized Person 			

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MAIL TO:
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