RI SOS Filing Number: 202444914800 Date: 1/29/2024 4:00:00 PM



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

2024

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP

Annual Report for the year: **Limited Liability Company**

→ Filing Fee: \$50.00

→ Filing period: February 1 - May 1

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2024 JAN 29 A 11: 19

1. Entity ID Number 001726173		2. Exact name of the Limited Liability Company GLEAM TEAM LLC			
3. NAICS Code 561720	i '	4. Brief description of the character of business conducted in Rhode Island JANITORIAL SERVICES			
5. State of Formation					
6. Principal Office Address		City	State	Zip	
305 GROSVENOR AVE		EAST PROVIDENCE	RI	02914	
7. Mailing Address of Limite	d Liability Company and Name o	r Title of Contact Person			
Contact Name NELVA M. SANCHEZ		Contact Title			
Street Address 305 GROSVENOR AVE		City EAST PROVIDENCE	State RI	^{Zip} 02914	
8. The Resident Agent infor	mation currently of record with th	e RI Department of State is accurate. Cl	hanges require	filing Form 642.	
	y, I declare and affirm that I had latements contained herein are	ve examined this report, including an true and correct.	y accompany	ing schedules and	
Name of Authorized Person			Date		
NELVA M. SANCHEZ			01/29/2024		
Signature of Authorized Per	mchez				

FILED

JAN 29 2024

MAIL TO:

Division of Business Services

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

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