

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

STAMP

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

2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

RECEIVED
R.I. DEPT. OF STATETO-STATE
BUS SYDS DEPT.

2024 JAN 29 A 11: 19

1 Entitle ID Number 2 Event name of the Limited Liability Comment				
1. Entity ID Number	2. Exact name of the Limited Liability Company			
001726173	GLEAM TEAM LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
561720	JANITORIAL SERVICES			
5. State of Formation				
RI				
6. Principal Office Address		City	State	Zip
305 GROSVENOR AVE		EAST PROVIDENCE	RI	02914
7. Mailing Address of Limited Liability Company and Name or 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 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	
NELVA M. SANCHEZ			01/29/2024	
Signature of Authorized Person NWA Sanchez				

FILED

JAN 29 2024 CC1C S X

MAIL TO:

Division of Business Services

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

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