RI SOS Filing Number: 202445194030 Date: 1/31/2024 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

Annual Report for the year: <u>\$ 1024</u> 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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1. Entity ID Number	2. Exact name of the Limited Liability Company			
001697387	Perla	Painting	440	
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
238320		\sim 1		
5. State of Formation	1ex/a 1	Paintin g	(((
6. Principal Office Address,	1	City	State Zip	
86 Nevark	57	Providence	R1 02908	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Contact Trile Contact Trile				
Street Address Newart St		City Brown dence	State _ Zip 02908	
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 /		
			01/31/202	
Signature of Authorized Person				
Jose A. Camira.				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

JAN 31 2024
BY FRUV H
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