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## State of Rhode Island

## **Department of State - Business Services Division**

2024 Annual Report for the year: **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 TECHWALLET LLC				
3. NAICS Code 541511 5. State of Formation RI	Brief description of the character of business conducted in Rhode Island     Custom Computer Programming Services				
Principal Office Address     CASTLETON DR		CRANSTON	State RI	Zip 02921	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name SUPRIYA KAVALI		Contact Title MANAGING MEMBER			
Street Address 7 CASTLETON DR		City CRANSTON	State RI	<sup>Zip</sup> 02921	
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		
SUPRIYA KAVALI		11/10/2023			
Signature of Authorized Person Kavali, 25 2024					

**FILED** 

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov Supriya Kavali 1/7/2024