



State of Rhode Island  
Department of State - Business Services Division

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SECRETARY OF STATE  
RI

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.

1. Entity ID Number <b>789954</b>	2. Exact name of the Limited Liability Company <b>R.I STINGRAYS Soccer Camps LLC</b>		
3. NAICS Code <b>[611600]</b>	4. Brief description of the character of business conducted in Rhode Island  <b>Soccer</b>		
5. State of Formation <b>Rhode Island</b>			
6. Principal Office Address <b>11 Church Street</b>		City <b>BARRINGTON</b>	State <b>R.I</b>
Zip <b>02806</b>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>MARIO PEREIRA</b>		Contact Title	
Street Address <b>11 Church Street</b>		City <b>BARRINGTON</b>	State <b>R.I</b>
Zip <b>02806</b>			
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 <b>MARIO PEREIRA</b>			Date <b>2/14/24</b>
Signature of Authorized Person 			

**MAIL TO:**

Division of Business Services  
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