RI SOS Filing Number: 202448390060 Date: 3/12/2024 4:00:00 PM



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

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.

<u> </u>		
REC'D RIDOS BSD 4 MAR 12 PM3:46:19	* 25 [8], 1	

1. Entity ID Number	2. Exact name of the Limited Liability Company					
001251934	Alta (SOU MUESTURAS 1/2					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
236118	Fix Pouses					
5. State of Formation	<u> </u>					
12I						
6. Principal Office Address		City	State	Zip		
22 Di Porte Dr		Sofustan	2F	02909		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Contact Title						
Alexander Would		aunts				
Street Address ZZ D , Pon. Ac iDr_		city Johston	State	Zip		
			RI	02 919		
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			
PHANDER World		03-12-2024				
Signature of Authorized Person						

MAR 1 2 2024 BY 23 A T

MAIL TO:

Division of Business Services

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

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