State of Rhode Island Department of St	tate - Business Service	es 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.				REC'D RIDO
1. Entity ID Number 001687616	2. Exact name of the Limited Liability Company  MIDDLE PASSAGE SHIPM END			
3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island  NO BUSINESS NO Entity  5. State of Formation  RT  Only an Idea on paper PACKAY Allivuu  Susan				
6. Principal Office Address		City	State no.	Zip
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name MAUrine K. DAW Contact Title				
Street Address LANARK WAY		City SILVEY Spri	State  M.O	Zip 2090/
8. The Resident Agent information	on currently of record with the R	Department of State is accur	rate. Changes require	
Under penalty of perjury, I dec statements, and that all staten		• •	any accompanying	schedules and
Name of Authorized Person			Date	
MAURINE A DAW			20 Feb	2024
Signature of Authorized Person				•

FILED

MAR 12 2024 BY EM 25C A.A. II'. II AM

MAIL TO:

**Division of Business Services** 

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

Mama. DAW

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