



State of Rhode Island  
Department of State - Business Services Division

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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 001663265		2. Exact name of the Limited Liability Company Montesino Translation, LLC	
3. NAICS Code 541930		4. Brief description of the character of business conducted in Rhode Island TRANSLATION SERVICES	
5. State of Formation ri			
6. Principal Office Address 24 CORLISS STREET #6387		City PROVIDENCE	State RI
		Zip 02904	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name PEDRO J. MONTESINO JR.		Contact Title AGENT	
Street Address 24 CORLISS STREET #6387		City PROVIDENCE	State RI
		Zip 02904	
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 DESIREE CABBAGE		Date 04/02/2024	
Signature of Authorized Person 			

FILED

APR 02 2024  
BY ML QCZDY

MAIL TO:

Division of Business Services

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

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