



State of Rhode Island
Department of State - Business Services Division

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.

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FOR
SECRETARY OF STATE
USE ONLY

1. Entity ID Number 1711649		2. Exact name of the Limited Liability Company Rhode Island Wreck and Remodel LLC	
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Real Estate	
5. State of Formation Rhode Island			
6. Principal Office Address PO Box 545		City Saunderstown	State RI
Zip 02874			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Stephen A. Moio		Contact Title	
Street Address PO Box 545		City Saunderstown	State RI
Zip 02874			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. <i>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.</i>			
Name of Authorized Person Stephen A. Moio			Date 4-12-24
Signature of Authorized Person 			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

FILED
APR 29 2024
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BY _____