



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.

REC'D RHODES S&D
24 MAY 21 12:01:09

1. Entity ID Number <u>001757231</u>		2. Exact name of the Limited Liability Company <u>CHPC LLC</u>	
3. NAICS Code <u>485999</u>		4. Brief description of the character of business conducted in Rhode Island <u>Transportation of passengers via pedicabs (bicycle cab), from one place to a destination, and to give sightseeing tours.</u>	
5. State of Formation <u>Rhode Island</u>			
6. Principal Office Address <u>P.O. Box 1031</u>		City <u>Newport</u>	State <u>RI</u>
		Zip <u>02840</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Peter Carson</u>		Contact Title <u>Owner / Manager</u>	
Street Address <u>24 Gilroy St</u>		City <u>Newport</u>	State <u>RI</u>
		Zip <u>02840</u>	
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 <u>Peter Carson</u>		Date <u>April 29, 2024</u>	
Signature of Authorized Person <u>Peter Carson</u>			

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MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov