



**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<br><u>1700855</u>   |  | 2. Exact name of the Limited Liability Company<br><u>NEW HORIZON HANDYMAN SERVICES LLC</u> |                        |
| 3. NAICS Code<br><u>236118</u>  |  | 4. Brief description of the character of business conducted in Rhode Island                |                        |
| 5. State of Formation<br><u>R.I.</u>  |  | <u>RESIDENTIAL CONSTRUCTION/COMMERCIAL</u>   |                        |
| 6. Principal Office Address<br><u>88 WINDCHELL RD</u>   |  | City<br><u>WARWICK</u>   | State<br><u>R.I.</u>   |
|   |  | Zip<br><u>02889</u>  |                        |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |  |  |                        |
| Contact Name<br><u>RONALD JULIANO</u>   |  | Contact Title<br><u>OWNER</u>  |                        |
| Street Address<br><u>88 WINDCHELL RD</u>  |  | City<br><u>WARWICK</u>   | State<br><u>R.I.</u>   |
|   |  | Zip<br><u>02889</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<br><u>RONALD JULIANO</u>  |  |  | Date<br><u>5-17-24</u> |
| Signature of Authorized Person<br>   |  |  |                        |

**MAIL TO:**  
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