

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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Entity ID Number	2. Exact name of the Limited Liability Company					
000793996	Surplus Provisions LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
451110	Retailer of Sporting goods, clothing, etc.					
5. State of Formation	ļ	, 0 5	•	•		
RI						
6. Principal Office Address		City	State	Zip		
721 Pontiac Ave.		Cranston	RI	02910		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name		Contact Title				
		Owner				
Street Address 721 Pontiac Ave.		City Cranston	State	02910		
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  France	k E. Pereira	Jr.	Date 5/25/2024			
Signature of Authorized Person						
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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