



State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year:
Limited Liability Company

2024

- 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 1760645		2. Exact name of the Limited Liability Company VIDAL Transportation LLC	
3. NAICS Code 435310		4. Brief description of the character of business conducted in Rhode Island Transporte Pasajeros (uber, Lyft)	
5. State of Formation RI			
6. Principal Office Address 39 VIOLA ST		City PROVIDENCE	State RI
		Zip 02909	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name ELVIN L VIDAL		Contact Title OWNER	
Street Address 39 VIOLA ST		City PROVIDENCE	State RI
		Zip 02909	
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 ELVIN L VIDAL HEREDIA		Date 6/6/24	
Signature of Authorized Person 			

FILED

JUN 06 2024
BY 4139F
AA

MAIL TO:

Division of Business Services
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