

State of Rhode Island

→ Filing period. February 1 - May 1

Department of State - Business Services Division

Annual Report for the year: **Limited Liability Company**

→ Filing Fee: \$50.00

2021

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number 2. Exact name of the Limited Liability Company 001709440 HOMBRE DE NEGOCIO ENT LLC 4. Brief description of the character of business conducted in Rhode Island CLOTHING DESIGN DISTRIBUTION State of Formation RHODE ISLAND 6 Principal Office Address City State Zip 2 MARLBOROUGH AVE **PROVIDENCE** 02907 RI 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Contact Title **ROY VALERIO PRESIDENT** Street Address State 2 MARLBOROUGH AVE **PROVIDENCE** RΙ 02907 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 Date ROY VALERIO 05/08/2024 Signature of Authorized Person

FILED

SEP 23 2024

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MAIL TO:

Division of Business Services

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