RI SOS Filing Number: 202564610110 Date: 2/12/2025 9:08:00 AM

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## State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 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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1. Entity ID Number 001721686	2. Exact name of the Limited Liability Company ROSARIO HOME DAYCARE LLC				
3. NAICS Code 3. NAICS Code 5. State of Formation RHODE ISLAND	Brief description of the character of business conducted in Rhode Island     HOME DAYCARE PROVIDER				
6. Principal Office Address		City	State	Zip	
85 LENOX AVE		PROVIDENCE	RI	02907	
7. Mailing Address of Limited	Liability Company and Name or T	itle of Contact Person			
Contact Name ROSARIO C MCGLONE		Contact Title MANAGER			
Street Address 85 LENOX AVE		<sup>City</sup> PROVIDENCE	State RI	<sup>Z<sub>ip</sub></sup> 02907	
8. The Resident Agent inform	ation currently of record with the f	RI Department of State is accurate	. Changes require	filing Form 642.	
<ol><li>Under penalty of perjury,</li></ol>	I declare and affirm that I have tements contained herein are tr	examined this report, including	any accompany	ing schedules and	
Name of Authorized Person			Date	<del></del> ·	
ROSARIO C MCGLOI	NE		01/20/2025		
Signatine of Authorized Person	^	10-1	<del>_</del>		

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MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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