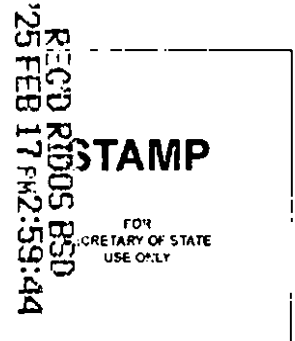




State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025
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 001680036 | | 2. Exact name of the Limited Liability Company RI FITNESS LLC | |
| 3. NAICS Code 713940 | | 4. Brief description of the character of business conducted in Rhode Island FITNESS AND RECREATIONAL SPORTS FACILITY | |
| 5. State of Formation Rhode Island | | | |
| 6. Principal Office Address 145 Elmgrove Ave | | City Providence | State RI |
| Zip 02906 | | | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name Michael Stevens | | Contact Title Member | |
| Street Address 145 Elmgrove Ave | | City Providence | State RI |
| Zip 02906 | | | |
| 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 Michael Stevens | | Date February 5, 2025 | |
| Signature of Authorized Person | | | |

FILED

FEB 17 2025

BY 144

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov