

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.

REC'D RIDGS BSD '25 FEB 26 AM 10:18:5	STAMP (1/16/14/PFOR COLOR (1	
$\circ_{\mathfrak{m}}$	\$17.00 (APT \$0.5 (Zes)	

Entity ID Number	2. Exact name of the Limited Lia	bility Company				
801723622	Vision Con	struction LL	<u> </u>	<u>. </u>		
3. NAICS Code	4. Brief description of the charac	ter of business conducted in Rho	de Island			
236/18						
5. State of Formation						
RT	Constru	ction				
6. Principal Office Address		City	State	Zip		
120 BROWIN	Ave	Johnston	RH	02915		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name 11 / 2		Contact Title				
HEET OR ROSC		Manager City Johnston BI 02918				
Street Address		City	State	Zip		
120 BRAWN H	مربه ا	JOHNSTON	RI	02919		
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			
Hector Ros	<u> </u>		2-6	26-25		
Signature of Authorized Person						
Heek	<u> </u>					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

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