



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.

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FOR
SECRETARY OF STATE
USE ONLY

1. Entity ID Number 1733751		2. Exact name of the Limited Liability Company 1ST EXPRESS WINGS LLC		
3. NAICS Code 485310		4. Brief description of the character of business conducted in Rhode Island TAXI BUSINESS. TRANSPORTATION OF PASSENGERS FROM AND TO DIFFERENT LOCATIONS IN RHODE ISLAND AND OUT OF STATE.		
5. State of Formation RI				
6. Principal Office Address 19 CHESTNUT STREET		City NORTH PROVIDENCE	State RI	Zip 02904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name BABATUNDE IKOTUN		Contact Title		
Street Address 19 CHESTNUT STREET		City North Providence	State RI	Zip 02904
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 BABATUNDE O. IKOTUN			Date 3/5/2025	
Signature of Authorized Person 				

FILED

MAR 05 2025

BY **E.D.D.10**

AA-8.53AM.

MAIL TO:

Division of Business Services
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