



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025

1. ID No. 001786396

2. Exact Name of the Limited Liability Company Data Analytic Solutions LLC

3. State of Formation

State: RI

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

541511

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

DATA ANALYTIC SOLUTION (DAS) PROVIDES A ROBUST SYSTEMS ENGINEERING FRAMEWORK TO SUPPORT END-TO-END DATA ANALYTICS AND BUSINESS INTELLIGENCE SOLUTIONS. OUR APPROACH INTEGRATES DATA AGGREGATION, PROCESSING, AND VISUALIZATION TO ENABLE DATA-DRIVEN DECISION-MAKING. WE LEVERAGE CLOUD-BASED ARCHITECTURES FOR SCALABILITY, SECURITY, AND PERFORMANCE. OUR SOLUTIONS INCORPORATE ETL PIPELINES, AI/ML MODELS, AND REAL-TIME ANALYTICS TO ENSURE ACTIONABLE INSIGHTS. DAS FOLLOWS AGILE METHODOLOGIES FOR RAPID ITERATION AND CONTINUOUS IMPROVEMENT. WE IMPLEMENT GOVERNANCE FRAMEWORKS TO

ENSURE DATA INTEGRITY, COMPLIANCE, AND SECURITY. OUR PLATFORM SUPPORTS
INTEROPERABILITY WITH MULTIPLE DATA SOURCES FOR SEAMLESS
INTEGRATION. WE
PROVIDE CUSTOM DASHBOARDS AND PREDICTIVE ANALYTICS TAILORED TO
BUSINESS
NEEDS. OUR ENGINEERING TEAM FOLLOWS DEVOPS PRINCIPLES FOR
CONTINUOUS
DEPLOYMENT AND MONITORING. DAS AIMS TO DELIVER SCALABLE, SECURE,
AND
EFFICIENT ANALYTICS SOLUTIONS THAT DRIVE BUSINESS TRANSFORMATION.

5. Principal Office Address

No. and Street: 18 CARRIE AVENUE
City or Town: RUMFORD State: RI Zip: 02916 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:
No. and Street: 18 CARRIE AVENUE
City or Town: RUMFORD State: RI Zip: 02916 Country: USA

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

EZHILMATHI LOURDURAJ 18 CARRIE AVENUE RUMFORD , RI 02916

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 7 Day of March, 2025 at 7:07:09 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By EZHILMATHI LOURDURAJ
Signature of Authorized Person