

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

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Annual Report for the year: 2015

→ 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	2. Exact name of the Limited Lia	bility Company	// -		
001684573	WMCLEANING	GERVICES A	110		
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
562 553	INDUSTRIAL AND COMMERCIAL CLEANING				
5. State of Formation					
RI					
6. Principal Office Address		City	State	Zip //	
40 TEOFILO BRAGA WAY		ETIST PROVID	X1_	029/4	
7. Mailing Address of Limited Lia	ability Company and Name or Title	of Contact Person		-	
Contact Name		Contact Title			
WAGNER MACHADO  Street Address 1 BRAGN WAY ATT 23		DWNER SARYEIZ			
Street Address		City	State	Zip 02914	
407605160 BP	961 WAY APT 25	FAST FROM DENCE	<u> </u>	02314	
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			
WHENER MY	PACHADON / 1	1	03-,	03.11.25	
Signature of Authorized Person  (Internal Description of Authorized Person of Authorized Pers					
		<del></del>			

**FILED** 

MAR 1 1 2025

MAIL TO:

**Division of Business Services** 

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

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