



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Limited Liability Company

2024

- 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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1. Entity ID Number 001761691		2. Exact name of the Limited Liability Company JASPERPMULLC	
3. NAICS Code 812112		4. Brief description of the character of business conducted in Rhode Island Semi-Permanent Eyebrows	
5. State of Formation Rhode Island			
6. Principal Office Address 14 ALVERSON AVE APT 2		City PROVIDENCE	State RI
		Zip 02909	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name NURIBEL POCHÉ		Contact Title OWNER	
Street Address 14 ALVERSON AVE APT 2		City PROVIDENCE	State RI
		Zip 02909	
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 NURIBEL POCHÉ		Date 03/13/2025	
Signature of Authorized Person Nuribel Poche Perez			

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MAR 13 2025

BY UDCXZ

[Signature]

MAIL TO:

Division of Business Services
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