



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.

FILED
 MAR 13 2025
 BY 9007

1. Entity ID Number 1779987		2. Exact name of the Limited Liability Company OMJAYPARAM LLC	
3. NAICS Code 452319		4. Brief description of the character of business conducted in Rhode Island General Store	
5. State of Formation Rhode Island			
6. Principal Office Address 253 SHINING ROCK DRIVE		City NORTHBRIDGE	State MA
		Zip 01534	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name NARENDRAKUMAR BARVALIYA		Contact Title Member	
Street Address 253 SHINING ROCK DRIVE		City NORTHBRIDGE	State MA
		Zip 01534	
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 Narendrakumar Barvaliya			Date 3-6-2025
Signature of Authorized Person <i>Narendrakumar Barvaliya</i>			

MAIL TO:

Division of Business Services

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