



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 18 2025

BY

1. Entity ID Number <u>01766718</u>		2. Exact name of the Limited Liability Company KB TAX AND MULTI SERVICE CENTER LLC	
3. NAICS Code 444100		4. Brief description of the character of business conducted in Rhode Island TAX RETURN	
5. State of Formation RHODE ISLAND			
6. Principal Office Address 574 SMITHFIELD AVE		City PAWTUCKET	State RI
Zip 02860			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name COLBERT BARIONNETTE		Contact Title PRESIDENT	
Street Address 17 COLONY DRIVE		City JOHNSTON	State RI
Zip 02919			
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 COLBERT BARIONNETTE		Date 3/12/2025	
Signature of Authorized Person 			

MAIL TO:

Division of Business Services

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