



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Limited Liability Company

2020

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP

SECRETARY OF STATE

1. Entity ID Number 001667103		2. Exact name of the Limited Liability Company T.MARTINS,LLC	
3. NAICS Code 454110		4. Brief description of the character of business conducted in Rhode Island INACTIVE LLC	
5. State of Formation RI			
6. Principal Office Address 354 MOUNT PLEASANT AVENUE		City PROVIDENCE	State RI
		Zip 02908	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name THEO MARTINS		Contact Title OWNER	
Street Address 354 MOUNT PLEASANT AVENUE		City PROVIDENCE	State RI
		Zip 02908	
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 THEO MARTINS		Date 3/14/2025	
Signature of Authorized Person 			

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

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