

State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 20 \$5

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by May 31.

	12' 2 '			
Entity ID Number	2. Exact name of the Limited Liability Company			
000906403	21 Camila Dor cleaners LLC-			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
812320 5. State of Formation	cleaners & Laundry			
HI HI		,		1010
6. Principal Office Address		City	State	Zip
OII Reservoir AVE		Prov.	RI	02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
ALEIANDYO Chomos		401 996 46 2C City State Zip East- Drov RI 02914		
Street Address		City	State	Zip
54 ALICE St.		East- Drov	RI	02914
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	
ALGANDO Chamus			3-24-24	
Signature of Authorized Person				
Byondo Chone				

FILED

MAR 2 4 2025 BY 3535 AA

MAIL TO:

Division of Business Services

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

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