

State of Rhode Island

Department of State - Business Services Division

1,025

Annual Report for the year: **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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
-1765 247	AB Consultancy UC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
541611	Consult, construct and manage residential and				
5. State of Formation	. •				
R.T.	conneccial renovations.				
6. Principal Office Address		City	State	Zip	
735 Steer	e Farm ld	Pascoag	RF	02859	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title	 -	-	
Anita Bruno					
Street Address		City	State	Zip	
735 Steere tam ld		Pascara	1 ST	02854	
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	<u>. </u>	
Anita Bruno		3.25.2025			
Signature of Authorized Person					
Charles bro					

FILED

MAR 25 2025

MAIL TO:

Division of Business Services

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