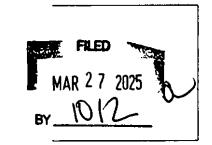


## State of Rhode Island Department of State - Business Services Division

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.



1. Entity ID Number	2. Exact name of the Limited Liability Company			
001723809	Trinidad Rentals, LLC			
3. NAICS Code 531110	Brief description of the character of business conducted in Rhode Island     Real Estate			
5. State of Formation RI				
6. Principal Office Address		City	State	Zip
P.O. Box 20125		Cranston	RI	02920
7. Mailing Address of Limite	d Liability Company and Name	or Title of Contact Person		
Contact Name Kenia E. Trinidad		Contact Title Member		
Street Address P.O. Box 20125		City Cranston	State RI	<sup>Zip</sup> 02920
8. The Resident Agent infor	mation currently of record with t	he RI Department of State is acc	urate. Changes requir	e filing Form 642.
9. Under penalty of perjur statements, and that all s	y, I declare and affirm that I he latements contained herein ai	ave examined this report, inclure true and correct.		
Name of Authorized Person			Date 2	1.2025
Kenia E. Trinidad			$\alpha \cdot \prime$	1.0005
Signature of Authorized Per	miis			

MAIL TO:

Division of Business Services

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

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