



State of Rhode Island
Department of State - Business Services Division

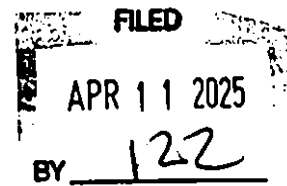
Annual Report for the year: 2025

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 001724023		2. Exact name of the Limited Liability Company EHSWAWNEE LLC		
3. NAICS Code 711130		4. Brief description of the character of business conducted in Rhode Island MUSICAL EVENT ENTERTAINMENT		
5. State of Formation 001724023				
6. Principal Office Address 903 BROAD ST		City PROVIDENCE	State RI	Zip 02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name SHAWNEE TAVERAS		Contact Title OWNER		
Street Address 241 COTTAGE ST		City PROVIDENCE	State RI	Zip 02907
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 SHAWNEE TAVERAS			Date 04/05/2025	
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