		of Rhode Isl		Fee: \$50.00
		the Secretary		
		8 W. River Stree		
1636		ence RI 02904-	2615	
		401) 222-3040		
Limited Liability Cor Annual Report				
Filing Period: February	1 - May 1			
In accordance with R.I. refusing to file its annua law (R.I.G.L. 7-16-66(bo	al report within thirty (30) days after the	time prescribed	
ANNUAL REPORT YEA	AR - ENTER THE CURRI	ENT YEAR 202	5 : <u>2025</u>	
1. ID No. <u>001761894</u>				
2. Exact Name of the Limited Liability Company <u>Yennys Customized Creations LLC</u>				
3. State of Formation				
State: <u>RI</u>				
NAICS CODE				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>453220</u>				
4. Brief Description of Island	f the Character of the B	usiness Which	is Actually Con	ducted in Rhode
<u>WE ARE CUSTOM CREATIONS IN GIFTS, NOVELTY, AND SOUVENIRS IN FABRIC, PLASTIC, METAL, AND WOOD.</u>				
5. Principal Office Ad	dress			
No. and Street:	36 MORTON AVE			
City or Town:	WOONSOCKET	State: <u>RI</u>	Zip: <u>02895</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Conta				
No. and Street:	<u>36 MORTON AVE</u>			

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

YENNY O PETERS 36 MORTON AVE WOONSOCKET, RI 02895

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 21 Day of April, 2025 at 8:05:16 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>YENNY OPETERS</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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