

State of Rhode Island Department of State - Business Services Division

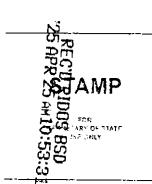
Annual Report for the year:
Limited Liability Company

2025

→ 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 001770337	2. Exact name of the Limited Liability Company FitFirst Wellness Inc.				
3. NAICS Code 456991	4. Brief description of the char FITNESS NUTRITION	Brief description of the character of business conducted in Rhode Island FITNESS NUTRITIONAL PRODUCTS			
5. State of Formation					
6. Principal Office Address 225 DYER ST FL 2		City PROVIDENCE	State RI	Zıp 02903	
	Liability Company and Name or Tit	ile of Contact Person			
Contact Name ALEXIS DE FEX		Contact Title CFO			
Street Address 225 DYER ST FL 2		City PROVIDENCE	State RI	^{Z:p} 02903	
8. The Resident Agent inform	nation currently of record with the RI	Department of State is accurate	. Changes require	L e filina Form 642	
9. Under penalty of perjury,	, I declare and affirm that I have e tements contained herein are true	examined this report, including	any accompany	ing schedules and	
Name of Authorized Person ALEXIS DE FEX			Date 04/25/2025		
Signature of Authorized Person			<u> </u>		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2 15

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