RI SOS Filing Number: 202571551530 Date: 4/25/2025 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

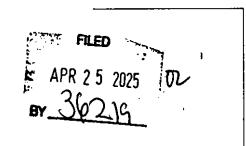
Annual Report for the year: Limited Liability Company

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 794041		2 Exact name of the Limited Liability Company TWISTED COLLISION, LLC			
3. NAICS Code 812990	· ·	Brief description of the character of business conducted in Rhode Island Boat charters and advertising.			
5. State of Formation					
6 Principal Office Address		City	State	Zip	
2244 Pawtucket Avenue		East Providence	RI	02914	
7 Mailing Address of Limited	Liability Company and Name or	Title of Contact Person			
Contact Name Stephen J. DiGianfilippo		Contact Title Attorney			
Street Address 50 Park Row West, Suite 107		City Providence	State RI	^{Zıp} 02903	
8. The Resident Agent inform	mation currently of record with the	RI Department of State is accura	te. Changes require	e filing Form 642.	
	r, I declare and affirm that I hav atements contained herein are	e examined this report, includin true and correct.	g any accompany	ving schedules and	
Name of Authorized Person			Date		
Dennis J. Bigelow, Manager			3 31, 2025		
Signature of Authorized Pers	son			_	

MAIL TO:

Division of Business Services

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

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