RI SOS Filing Number: 202572987310 Date: 5/13/2025 4:00:00 PM



STAMP

Annual Report for the year: 2025 Limited Liability Company

→ Filing period: February 1 - May 1

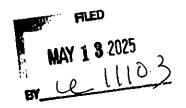
→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

RECEIVED AND RAIL DEPT. OF STORY BUS SYCS 2:

2025 MAY 13 A 8: 45

1. Entity ID Number	2. Exact name of the Limited	Liability Company		
001674490	PEREZ COLLISION CENTER, LLC			
3. NAICS Code 811111	4. Brief description of the character of business conducted in Rhode Island ENGAGE IN THE BODY SHOP BUSINESS AND AUTO REPAIR SERVICE			
5. State of Formation RHODE ISLAND	] 		·	
6. Principal Office Address 59 WEST FRIENDSHIP STREET		City PROVIDENCE	State RI	Zip 02907
7. Mailing Address of Limited Lie	ability Company and Name or T	itle of Contact Person		
Contact Name CARLOS PEREZ		Contact Title MEMBER		
Street Address 120 SASSAFRAS STREET		City PROVIDENCE	State RI	<sup>Zip</sup> 02907
		RI Department of State is accurate	. Changes require	e filing Form 642.
Under penalty of periury, I de	clare and affirm that I have ex ments contained herein are tr	amined this report, including ar	ny accompanyin	g schedules and
Name of Authorized Person			Date	
CARLOS PEREZ			02/05/2025	
Signature of Authorized Person	D.			



MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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