State of Rhode Island
Department of State - Business Services Division

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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 001674490	2. Exact name of the Limited Liability Company 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 Liability Company and Name or Title of Contact Person			
Contact Name CARLOS PEREZ	Contact Title MEMBER		
Street Address 120 SASSAFRAS STREET	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.			
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 CARLOS PEREZ		Date 02/05/2025	
Signature of Authorized Person X Carlos Perez			

FILED
MAY 13 2025
BY 11103

MAIL TO:
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