



State of Rhode Island  
Department of State - Business Services Division

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.

2025 MAY 12 4:04  
 RECEIVED  
 DEPT. OF STATE  
 BUS SVCS DIV

1. Entry ID Number 001751899		2. Exact name of the Limited Liability Company MANNY'S TRANSMISSION, LLC	
3. NAICS Code 811111		4. Brief description of the character of business conducted in Rhode Island TRANSMISSION CENTER	
5. State of Formation RHODE ISLAND			
6. Principal Office Address 1114 NEWPORT AVENUE		City PAWTUCKET	State RI
Zip 02861			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name MANUEL A. ROJAS		Contact Title MANAGER	
Street Address 100 FOUNDRY STREET		City CENTRAL FALLS	State RI
Zip 02863			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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 MANUEL A. ROJAS		Date 02/06/2025	
Signature of Authorized Person <i>Manuel A Rojas</i>			

FILED  
 MAY 12 2025  
 BY 61100

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov