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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.

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1. Entity ID Number 1659227		2. Exact name of the Limited Liability Company EXPERTISE DRIVING SCHOOL, LLC		
3. NAICS Code 611692	4. Brief description of the char DRIVING SCHOOL	Brief description of the character of business conducted in Rhode Island DRIVING SCHOOL		
5. State of Formation RHODE ISLAND			1000000	
6. Principal Office Address P O BOX 27347		City PROVIDENCE	State RI	Zip 02907
7. Mailing Address of Limit	ed Liability Company and Name or Ti	tle of Contact Person		
Contact Name MAXIMO ZAPATA		Contact Title MANAGER		
Street Address P O BOX 27347		City PROVIDENCE	State RI	^{Zip} 02907
8. The Resident Agent info	rmation currently of record with the R	I Department of State is accurate	e. Changes requir	e filing Form 642.
Under penalty of perjury	I declare and affirm that I have exitatements contained herein are tru	amined this report, including a		
Name of Authorized Person			Date	
MAXIMO ZAPATA			12/27/2024	

MAY 1 9 2025 BY 4 84

MAIL TO:

Division of Business Services

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

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