

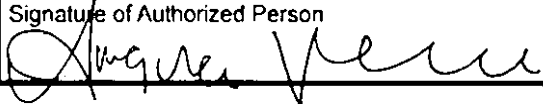


State of Rhode Island
Department of State - Business Services Division

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.

REC'D RINGE REC
25 MAY 21 PM 12:55:05

1. Entity ID Number 001680035		2. Exact name of the Limited Liability Company The Barre & Yoga Experience LLC		
3. NAICS Code 713049		4. Brief description of the character of business conducted in Rhode Island to provide fitness & yoga activities		
5. State of Formation Rhode Island				
6. Principal Office Address 259 Putnam Pike		City Smithfield	State RI	Zip 02917
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Angela Vieira		Contact Title Member		
Street Address 24 Kinnicutt Ave		City Warren	State RI	Zip 02917
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 Angela Vieira			Date 4/6/25	
Signature of Authorized Person 				

FILED

MAY 21 2025

BY 


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