

## State of Rhode Island Department of State - Business Services Division

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Annual Report for the year: Limited Liability Company

→ Filing Fee: \$50.00

→ Filing period: February 1 - May 1

2025

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

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2. Exact name of the Limited Liability Company 1. Entity ID Number RI SANCH, LLC 001750471 4. Brief description of the character of business conducted in Rhode Island 3. NAICS Code CLOTHING 448150 5. State of Formation RHODE ISLAND Zip State City 6. Principal Office Address 02907 RΙ **PROVIDENCE** 81 SACKETT STREET 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Title Contact Name MANAGER YOHANNA C. SANCHEZ State Street Address RI **PROVIDENCE** 02907 81 SACKETT STREET 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 02/05/2025 YOHANNA SANCHEZ

MAIL TO:

**Division of Business Services** 

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