State of Rhode Island
Department of State - Business Services Division

FILED
JUN 16 2025
BY 10210

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	2. Exact name of the Limited Liability Company		
001751550	CARLEEN'S BODY HEALING THERAPY, LLC		
3. NAICS Code 541990	4. Brief description of the character of business conducted in Rhode Island ENERGY ENHANCEMENT, REIKI, LIGHT THERAPY		
5. State of Formation RI			
6. Principal Office Address 639 QUAKER LANE	City WEST WARWICK	State RI	Zip 02893
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name CARLEEN CHRISTOPHER	Contact Title MEMBER		
Street Address 13A VICTORY HIGHWAY	City FOSTER	State RI	Zip 02825
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 CARLEEN CHRISTOPHER		Date	
Signature of Authorized Person			

MAIL TO:
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