

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2025

-> 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	2. Exact name of the Limited Liability Company					
001760733	J&K AUTO Repair 14					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
8////						
5. State of Formation	GENERAL AUTOMOTIVE BEPAIR					
B1						
6. Principal Office Address	ADD PAYDONIO	City	State	Zip		
CAUDIOHLGALI	707 BROWAX	PAWTUCKEI	B1	02860		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name		CONTACT THE	GALA	D0		
Street Address 29 COYINTH 3+		PROVIDENCE	State /	02907		
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		Date				
CAUDIO BEGALADO		8-10-	-2027			
Signature of Authorized Person						
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MAIL TO:

Division of Business Services

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