

## State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: **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	2. Exact pame of the Limited Liability Company					
1724814	Rhatt / Studio UC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
5/2/10	viduo production					
5. State of Formation						
KI.	<u></u>	**************************************	<u> </u>	770		
6. Principal Office Address		City	State	Zip A Q		
212 1st Ave	#IB	Woomsockit	KT	08872		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name ( ) Contact Title						
table & Hardnes Western Owner						
Street Address 212 1St AVa	# TE	Was mad det	State	01895		
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		10-6-25				
Signature of Authorized Person						

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MAIL'TO:

Division of Business Services

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

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