



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

Annual Report for the year: 2023
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.

MAY 04 2023

2600 *DL*

1. Entity ID Number 000793996		2. Exact name of the Limited Liability Company SURPLUS PROVISIONS, LLC.	
3. NAICS Code 451110		4. Brief description of the character of business conducted in Rhode Island RETAILER OF CLOTHING, SPORTING GOODS, MILITARY SURPLUS, SURVIVAL GEAR, ETC	
5. State of Formation Rhode Island			
6. Principal Office Address 721 PONTIAC AVENUE		City CRANSTON	State RI
Zip 02910			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name		Contact Title Owner	
Street Address 530 WELLINGTON AVE. BOX 18		City CRANSTON	State RI
Zip 02910			
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 Frank E. Pereira Jr.		Date 4/28/23	
Signature of Authorized Person 			

MAIL TO:
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