	State of Rhode Island Fee: \$50.00 Office of the Secretary of State
	Division Of Business Services
	148 W. River Street
	Providence RI 02904-2615
1636	(401) 222-3040
Limited Liability	y Company
Annual Report	
Filing Period: Feb	nuary i - May i
	th R.I.G.L. 7-16-66(d), each limited liability company failing or
	annual report within thirty (30) days after the time prescribed by 6-66(b&c)) is subject to a penalty fee of \$25.00.
ANNUAL REPOR	RT YEAR - ENTER THE CURRENT YEAR <b>2024</b> : <u>2024</u>
1. ID No. <u>000</u>	0756133
2. Exact Name of	of the Limited Liability Company <u>VP FITNESS, LLC</u>
3. State of Form	nation
State: <u>RI</u>	
	NAICS CODE
	it NAICS Code that best describes the primary business conducted by the entity. It of codes <u>here.</u> More information on <u>NAICS</u> can be found online.
<u>713940</u>	
4. Brief Descript Island	tion of the Character of the Business Which is Actually Conducted in Rhode
TO PROVIDE F	FITNESS/PERSONAL TRAINING SERVICES.
5. Principal Offic	ce Address
No. and Street:	10 DORRANCE STREET
	<u>SUITE 200</u>
City or Town:	<u>PROVIDENCE</u> State: <u>RI</u> Zip: <u>02903</u> Country: <u>USA</u>
6. Mailing Addre	ess of Limited Liability Company and Name or Title of Contact Person:
	JOSEPH DEPENA Contact Title: MEMBER
Contact Name:	
Contact Name: No. and Street:	<u>10 DORRANCE ST</u>
	<u>10 DORRANCE ST</u> <u>SUITE 200</u> <u>PROVIDENCE</u> State: <u>RI</u> zip: <u>02903</u> Country: <u>USA</u>

## 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JOSEPH DEPENA 38 LUCY STREET PROVIDENCE, RI 02909

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 26 Day of January, 2024 at 5:44:04 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By /S/ JOSEPH DEPENA

Signature of Authorized Person

Form No. 632 Revised 09/07

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