



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2008

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b)(c)) is subject to a penalty fee of \$25.00.

1. ID No. <u>1165232</u>		2. Exact name of the limited liability company <u>Buona Fortuna, LLC</u>			
3. State of Formation <u>RI</u>		4. Brief description of the character of the business which is actually conducted in Rhode Island <u>Entertainment</u>			
5. Principal office address <u>68 Old Mill Rd.</u>		City <u>Charlestown</u>		State <u>RI</u>	Zip <u>02813</u>
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name <u>Maiga Hill-Hinnant</u>		Contact Title <u>Co-Owner</u>		State <u>RI</u>	
Street Address <u>68 Old Mill Rd</u>		City <u>Charlestown</u>		State <u>RI</u>	Zip <u>02813</u>
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name <u>Maiga Hill-Hinnant</u>		Manager Name <u>Maiga Hill-Hinnant</u>		Manager Name <u>Maiga Hill-Hinnant</u>	
Street Address <u>68 Old Mill Rd</u>		Street Address <u>68 Old Mill Rd</u>		Street Address <u>68 Old Mill Rd</u>	
City <u>Charlestown</u>		City <u>Charlestown</u>		City <u>Charlestown</u>	
State <u>RI</u>		State <u>RI</u>		State <u>RI</u>	
Zip <u>02813</u>		Zip <u>02813</u>		Zip <u>02813</u>	
8. RESIDENT AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11					

FILED

APR 07 2009

By Maiga Hill-Hinnant

29-86013

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

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SECRETARY OF STATE
CORPORATIONS DIV
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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.

Maiga Hill-Hinnant 04/07/09
Signature of Authorized Person Date

Maiga Hill-Hinnant
Print or Type Name of Authorized Person

File Date _____

Check No. _____

By: _____

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