



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2012

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 114423		2. Exact name of the limited liability company HOT SPOT, LLC.			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island to operate a donut shop			
5. Principal office address 3781 Mendon Road		City Cumberland	State RI	Zip 02864-0000	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY (IF APPLICABLE) AND CONTACT PERSON:					
Contact Name Demetrius D. Sampalis		Contact Title Member			
Street Address 3781 Mendon Road		City Cumberland	State RI	Zip 02864-0000	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE. (CHECK BOX FOR ATTACHMENT) ☐					
Manager Name Demetrius D. Sampalis		Manager Name Valerie B. Sampalis			
Street Address 11 Betsy Williams Circle		Street Address 11 Betsy Williams Circle			
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Manager Name Dennis J. Sampalis		Manager Name			
Street Address 11 Betsy Williams Circle		Street Address			
City Johnston	State RI	Zip 02919	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

AUG 28 2012

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File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

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.

Demetrius D. Sampalis 09/04/2012
Signature of Authorized Person Date
Demetrius D. Sampalis

By: _____
Print or Type Name of Authorized Person
Member