

## 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

Amended

## 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.	2. Exact nan	2. Exact name of the limited liability company							
536162	125 Ca	125 Canal Street, LLC							
3. State of Formation	4. Brief desc	Brief description of the character of business conducted in Rhode Island							
RI	Restau	Restaurant							
5. Principal office address		***	City	City State Zip					
254 Old Forge	Road		Warwick	RI 02818					
6. MAILING ADDRESS OF L	IMITED LIABILIT	Y COMPANY AND NAI	ME OR TITLE OF CONTACT P	ERSON:					
Contact Name			Contact Title						
Scott Parker			Manager						
Street Address			City	State	Zip				
254 Old Forge Road			Warwick	Warwick RI					
7. LIST ALL MANAGERS (N ("X" BOX FOR ATTACHM Manager Name		RESSES) OF THE LIM	Manager Name	APPLICABLE - <u>DO</u>	NOT LIST MEMBERS				
Scott Parker									
Street Address 254 Old Forge Road			Street Address						
City	State	Zip	City	State	Zip				
Warwick	RI	02818							
Manager Name			Manager Name						
Street Address			Street Address						
City	State	Zip	City	State	Zip				
8. RESIDENT AGENT IN RH	ODE ISLAND								
This information is currentl	y of record in the	e Office of the Secreta	ry of State. Changes require t	filing Form 642.					
					20				
		בוו בח	MARK		75				
		FILED	195フ		7.				

FILED 935 NOV 2 8 2012

BY\_DZ\_\_\_\_

File Date							. 11
Check No	:						.::
By:							
FOR SECR	RETAI	RY O	FST	ATE I	ISE (	ONL	v

Form No. 632 Revised: 01/2012

Inder pen <del>alty o</del> f perjury, I declare and affirm t	hat I have examined
his report, including any accompanying sche and that all statements contained herein are to	dules and statements,
nd that all statements contained herein are to	rue and correct.

Signature of Authorized Person Date

Scott Parker

Print or Type Name of Authorized Person