

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

Form 632 Rev. 12/05

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR Filing Period: September 1 - November 1 • Filing Fee: \$50.00

1. ID No. 140593	2. Exact na	Exact name of the limited liabilty company HILOPATEER, LLC						
3. State of Formation			of the character of the busines	s which is actually conducted	in Rhode Island			
RHODE ISLA	ND P	IZZA RESTAU	RANT					
5. Principal office address				City	State	Zip)	
881 CENTRAL AVENUE				PAWTUCKET	RI	0:	2861-	
Contact Name				C + 170				
<i>Jontact Name</i> ALBERT MOR(CoUS			Contact Title MEMBER				
Street Address				City	State	Zip	-	
383 CENTRAL AVENUE				. PAWTUCKET	RI	02	2861-	
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gent Name	MA ECO			Address				
DAVID DIPALI	MA, ESQ.			City		Zip		
138 WARREN AVENUE						1 '		
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his report mus	t be executed	by an authoriz	ed person pursuant to	R.I.G.L. 7-16-66 (b).		5		
FILED						97 :01	27	
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			FEB 2 7 201	l.				
		. , ,	7 (0 1 (0)	Under penalty of perj	jury, I declare and	affirm that I have	examined	
			218482	this report, including	any accompanying	g schedules and s	tatements,	
140593 DLLC	10/05/06 02	:10:36 PM* M		and that all statement	is contained herein	are true and cort	ect.	
File Date	-			V10 81/5-	2.	2/	aliu	
Check No.	1495	-	1	Signature of Authorized	i Person	Date	1/17	
`				_ ALBERT MOR	PCOHE			
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B <u>v:</u> FOR SECRETARY		<u> </u>		Print or Type Name of				