



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

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

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2013

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

1. ID No. 150942		2. Exact name of the limited liability company LUCA'S COFFEE & ICE CREAM, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island COFFEE AND ICE CREAM SHOP			
5. Principal office address 701 Boston Neck Road		City North Kingstown		State RI	Zip 02852
6. MAILING ADDRESS (If different from principal office address, provide the mailing address)					
Contact Name NIKOLIN LUCAJ		Contact Title MEMBER			
Street Address 701 Boston Neck Road		City North Kingstown		State RI	Zip 02852
7. NAME AND ADDRESS OF EACH MANAGER (If more than one, list each separately)					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. PRINTED NAME OF AGENT FOR SERVICE OF PROCESS (If different from principal office address, provide the mailing address)					
Agent Name DAVID DIPALMA, ESQ.		Address			
Address 138 WARREN AVENUE		City EAST PROVIDENCE		Zip 02914	

2014 JUN 11 PM 3:27
CORPORATIONS DIV

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



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By:

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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.

Signature of Authorized Person

Date

NIKOLIN LUCAJ

Print or Type Name of Authorized Person