

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

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

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. 274636	2. Exact name of the limited liability company Z Culinary Services, LLC						
3. State of Formation Rhode Island	Brief description of the character of business conducted in Rhode Island Preparation of food, serving food and catering.						
5. Principal office address 1 Steere Road			City Cumberland	State RI	Zip 02864		
	LIMITED LIABILI	TY COMPANY AND	NAME OF THE OF CONTACT P	ERSON			
Contact Name Russ Zito			Contact Title Member				
Street Address 1 Steere Road			City Cumberland	State RI	Zip 02864		
7. LIST ALL NANAGERS (("X" BOX FOR ATTACHI	NAMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - DO			
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		
BERESIDENT AGENT IN RI	HODE ISLAND	a en de proposition		CEPTE THEORETICAL STR			
This information is current	tly of record in the	Office of the Secr	etary of State. Changes require fi	ling Form 642.			

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By: _			
	ECRETAI	ATE USE	ONLY

Form No. 632 Revised: 01/2012 Under penalty of perjury, 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.

10/15/2014

Signature of Authorized Parson

MUMBER

Date

Print or Type Name of Authorized Person