



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 **2015**

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. 502553		2. Exact name of the limited liability company TIENDA Y PANADERIA EL QUICHE 2, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of business conducted in Rhode Island ALL KIND OF GUATEMALAN GROCERY			
5. Principal office address 598 CRANSTON STREET		City PROVIDENCE	State RI	Zip 02907	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name BYRON JUAREZ		Contact Title MANAGER			
Street Address 38 HERSCHER STREET		City PROVIDENCE	State RI	Zip 02909	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name BYRON JUAREZ		Manager Name			
Street Address 38 HERSCHER STREET		Street Address			
City PROVIDENCE	State RI	Zip 02908	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	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

OCT 07 2015

BY

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

08/28/2015

Date

BYRON JUAREZ

Print or Type Name of Authorized Person

File Date

Check No

By:

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