

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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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.

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			Juliot dopoota	o or the look madsay
5. Principal office address 214B Main Street			State RI	Zip 02818
	and green and a special specia			
Contact Name John D. Biafore		Contact Title Attorney		
Street Address 478A Broadway		City Providence	State RI	Zip 02909
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ly of record in the	Office of the Secr	etary of State. Changes require fil	ing Form 642.	
	A. Brief des to own a	Chase Foods Company 4. Brief description of the chara to own and operate res NAMES AND ADDRESSES OF THE MEAN) State Zip State Zip	City East Greenwich Contact Title Attorney City Providence Manager Name Street Address State Zip City Manager Name Street Address Street Address State Zip City City City City City City City Cit	4. Brief description of the character of business conducted in Rhode Island to own and operate restaurants and to supervise all other aspects City East Greenwich Rl

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Form No. 632 Revised: 01/2012