



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 **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. 532920		2. Exact name of the limited liability company JULIANNA'S RESTAURANT, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of business conducted in Rhode Island RESTAURANT			
5. Principal office address 553 HARTFORD AVENUE			City PROVIDENCE	State RI	Zip 02909
Contact Name ARIEL M. MELGAR			Contact Title MANAGER		
Street Address 505 GREENVILLE AVENUE 1ST FL			City JOHNSTON	State RI	Zip 02919
Manager Name ARIEL M. MELGAR			Manager Name		
Street Address 505 GREENVILLE AVENUE 1ST FL			Street Address		
City JOHNSTON	State RI	Zip 02919	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.

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 SECRETARY OF STATE
 CORPORATIONS DIV
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By LL 259449
 11:58



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.

ARIEL M. MELGAR

Signature of Authorized Person

10/08/2015

Date

ARIEL M. MELGAR

Print or Type Name of Authorized Person