



**State of Rhode Island and Providence Plantations
Department of State - Business Services Division**

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RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

Limited Liability Company Annual Report for the year: 2015

2016 APR 28 PM 12:39

Filing period: September 1 - November 1

Filing Fee: \$50.00 *FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Exact name of the Limited Liability Company	
161250		VASELEOS, LLC.	
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island	
RHODE ISLAND		RESTAURANT SERVING PIZZA AND OTHER FOODS	
5. Principal Office Address		City	State
1379 MINERAL SPRING AVENUE		NORTH PROVIDENCE	RI
		Zip	02904
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name		Contact Title	
EVDOKIA MILATOU		MEMBER	
Street Address		City	State
1379 MINERAL SPRING AVENUE		NORTH PROVIDENCE	RI
		Zip	02904
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name		Manager Name	
Street Address		Street Address	
City		City	State
			Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
Check the box to indicate an attachment <input type="checkbox"/>			
8. Resident Agent in Rhode Island This information is currently of record in the Department of State. Changes require filing Form 642.			
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.			
Name of Authorized Person			Date
EVDOKIA MILATOU			4/28/16
Signature of Authorized Person			SIGN DOCUMENT HERE
Evdokia Milatou			

FILED
APR 28 2016
By 273157
AA 12:44 p.m.