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Annual Report for the year: 2016 Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 1337809	2. Exact name of the Limited Liability Company EZ BAR, LLC							
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island							
RHODE ISLAND	CATERING AND BARTENDING SERVICE							
5. Principal Office Address 342 AUBURN STREET			City CRANSTON	State RI	Zip 02910			
6. Mailing Address of Limited Lia	bility Compa	ny and Name o			•			
Contact Name STEPHEN P. HALLAS			Contact Title OWNER	Contact Title OWNER				
Street Address 342 AUBURN STREET			City CRANSTON	State RI	^{Zip} 02910			
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS								
Manager Name			Manager Name	Manager Name				
Street Address			Street Address	Street Address				
City	State	Zip	City	State	Zip			
Manager Name			Manager Name	Manager Name				
Street Address			Street Address	Street Address				
City	State	Zip	City	State	Zip			
				Check the box to in	ndicate an attachment			
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			
STEPHEN P. HALLAS					8/16/2016			
Signature of Authorized Person SIGN DOCUMENT HERE								

FILED

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov AUG 1 6 2016 A.A.