State of Rhode Island and Providence Plantations  Department of State - Business Services Division	
Annual Report for the year:	
Limited Liability Company	
→ Filing period: September 1 - November 1	

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

	<del></del>						
1. Entity ID Number	2. Exact na	me of the Limite	ted Liability Company				
000137063	Elite Pizza	Restaurant il l	LLC				
3. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island					
44-45 - Retail Trade	Retail - Fo	Retail - Food, Pizza Restaurant					
5. State of Formation	1						
RI							
6. Principal Office Address			City	State	Zip		
1452 Broncos Highway, Bronc	o Crossing		Burrillville	RI	02830		
7. Mailing Address of Limited Lia	<del> </del>	ny and Name o	9.00				
Contact Name ABRAHAM SAVVIDIS		Contact Title MEMBER	Contact Title MEMBER				
Street Address 1452 BRONCOS HIGHWAY		City BURRILLVILLE	State RI	<sup>Zip</sup> 02830			
8. List ALL managers (names ar	nd addresses	i) of the Limited	Liability Company, IF APPLICABL	E - 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 i	indicate an attachment		
			of record with the Department of State.				
Under penalty of perjury, I deci statements, and that all statem			examined this report, including a true and correct.	any accompanyin	g schedules and		
Name of Authorized Person				Date			
ABRAHAM SAVVIDIS				09/26/2016			
Signature of Authorized Person		Offer	rocussiument.				

## MAIL TO:

**Division of Business Services** 

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

**Phone:** (401) 222-3040 **Website:** www.sos.ri.gov

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