




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

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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 830999		2. Exact name of the Limited Liability Company Rhode Island Vapor Company LLC			
3. NAICS Code 44-45 - Retail Trade		4. Brief description of the character of business conducted in Rhode Island Sales of E-Cigarettes/E-Liquid			
5. State of Formation Rhode Island					
6. Principal Office Address 1375 Mineral Spring Avenue		City North Providence	State RI	Zip 02904	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Dino Baccari			Contact Title Owner		
Street Address 100 Fountain Street, Apt. 6A			City Providence	State RI	Zip 02903
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Dino Baccari			Manager Name		
Street Address 100 Fountain Street, Apt. 6A			Street Address		
City Providence	State RI	Zip 02903	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"/>					
9. Resident Agent in Rhode Island. This information is currently of record with 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 Dino Baccari				Date 10/21/16	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

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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OCT 25 2016

BY CH 286798