State of Rhode Island and Providence Plantations Department of State - Business Services Division						· - tot-	
Department of S	tate - Busini	ess services	DIVIS	SIOH		-3	
Annual Report for the year:						RAIL DEFINE BUS SYLES 2016 DEC 21 A	
→ Penalty: Additional \$25.00 fee if form is not filed by December						MIII:	
1. Entity ID Number	2. Exact name of the Limited Liability Company						
844720	La avarter (We and Longue LCC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
72	Draking Longue. with Pool tables Sports BAT						
5. State of Formation R. I	1,1x6						
6. Principal Office Address			City		State	Zip	
1080B Chalkstone			Pro	oodence	RI	02908	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Rafael Carmona				Contact Title Owner			
Street Address 1080 B Chalkstone Ave			City	Providence	State PLL	Zip 02908	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name ISaira Pimentel				Manager Name ISAU/A PINNEITE!			
Street Address 587 Central Ave City RI Thurston Dang & Zang			Street Address JUNNSTON				
City RI TUNNSTON State · RI Zip & Zana			City		State	Zip	
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
-	l	<u>1</u>		Che	ck the box to ind	icate an attachment	
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 In RI					Date		
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 FILED W.54

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