Annual Report for the y Limited Liability Compa  → Filing period: September  → Filing Fee: \$50.00  → Penalty: Additional \$25.00	any 1 - Novemb	er 1	ember 1.	_	
1. Entity ID Number	2. Exact name of the Limited Liability Company				
150234	L&B PUB, LLC				
3. NAICS Code 72 - Accommodation and Food 5. State of Formation	Brief description of the character of business conducted in Rhode Island  BAR				
RI					
6. Principal Office Address 121 EMPIRE STREET			City PROVIDENCE	State RI	Zip 02903
7. Mailing Address of Limited Lia	bility Compar	ny and Name or Ti	tle of Contact Person	<u> </u>	
Contact Name LOUS L BRADY			Contact Title MANAGER		
Street Address 121 EMPIRE STREET			City PROVIDENCE	State RI	Zip <b>0290</b> 3
8. List ALL managers (names ar		) of the Limited Lia	bility Company, IF APPLICABI	E - DO NOT LIST	MEMBERS
Manager Name BRENDA SYPNIE	WSKI		Manager Name N/A		
Street Address 1043 HARTFORD PIKE			Street Address		
City NORTH SCITUATE	State RI	Zip 02857	City	State	Zip
Manager Name LOUS BRADY			Manager Name N/A		
Street Address 1 CHESTNUT STREET #819			Street Address		
City PROVIDENCE	State RI	Zip 02903	City	State	Zip
				Check the box to	indicate an attachment
9. Resident Agent in Rhode Islan					
Under penalty of perjury, I dec statements, and that all statem				any accompanyin	g schedules and
Name of Authorized Person				Date	lido
LOUIS L. BRADY				ر ک	idn

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

Signature of Authorized Person

FILED

MAY 1 5 2017

BY 4921 1CW