



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

FILED

AUG 07 2017

BY ROC 309782
 11:23

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.

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 R.I. DEPT. OF STATE
 BUS SVCS DIV
 2017 AUG - 7 AM 11:16

1. Entity ID Number <u>1099954</u>		2. Exact name of the Limited Liability Company <u>Babel Express & Deli</u>	
3. NAICS Code <u>311812</u>		4. Brief description of the character of business conducted in Rhode Island <u>Bakery & coffee shop</u>	
5. State of Formation <u>R.I.</u>			
6. Principal Office Address <u>1846 Smith St</u>		City <u>N. Prov</u>	State <u>R.I.</u>
		Zip <u>02911</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>ANTHONY LIZOTTE</u>		Contact Title <u>OWNER</u>	
Street Address <u>144 High Service Dr</u>		City <u>N. Prov</u>	State <u>RI</u>
		Zip <u>02911</u>	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
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 <u>Anthony Lizotte</u>		Date <u>8/7/17</u>	
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