	State of Rhode Island and Providen Office of the Secretary of S	
	Division Of Business Service	es
	148 W. River Street	
	Providence RI 02904-2613	5
HOPE	(401) 222-3040	
Limited Liability C Annual Report Filing Period: Septemb		
to file its annual report	.G.L. 7-16-66(d), each limited liability company fai within thirty (30) days after the time prescribed by to a penalty fee of \$25.00.	
ANNUAL REPORT YE	EAR: <u>2017</u>	
1. ID No. <u>00079</u> :	5621	
2. Exact Name of th	e Limited Liability Company <u>Q B BITES, LL</u>	<u>C</u>
3. State of Formatio	on	
State: <u>RI</u>		
	ARTICLE III	
5	CS Code that best describes the primary busines More information on <u>NAICS</u> can be found online.	s conducted by the entity. Download
<u>531110</u>		
4 Brief Description		
4. Bhei Description	of the Character of the Business Which is Act	ually Conducted in Rhode Island
REAL ESTATE HO		ually Conducted in Rhode Island
	LDINGS	ually Conducted in Rhode Island
REAL ESTATE HO	LDINGS ddress	ually Conducted in Rhode Island
REAL ESTATE HO 5. Principal Office Ad No. and Street: <u>2</u>	LDINGS	-
REAL ESTATE HO 5. Principal Office Ad No. and Street: 2. City or Town: <u>W</u>	<u>LDINGS</u> ddress <u>3 WASHINGTON STREET</u>	Zip: <u>02893</u> Country: <u>USA</u>
REAL ESTATE HO 5. Principal Office Ad No. and Street: 2. City or Town: W 6. Mailing Address of Contact Name: ILIA:	LDINGS ddress 3 WASHINGTON STREET VEST WARWICK State: RI of Limited Liability Company and Name or Titl S ZAROKOSTAS Contact Title:	Zip: <u>02893</u> Country: <u>USA</u>
REAL ESTATE HO 5. Principal Office Ad No. and Street: 2. City or Town: W 6. Mailing Address of Contact Name: ILIA: No. and Street: 2.3	<u>ADINGS</u> ddress <u>3 WASHINGTON STREET</u> <u>VEST WARWICK</u> State: <u>RI</u> of Limited Liability Company and Name or Titles <u>S ZAROKOSTAS</u> Contact Title: <u>3 WASHINGTON STREET</u>	Zip: <u>02893</u> Country: <u>USA</u> e of Contact Person:
REAL ESTATE HO 5. Principal Office Ad No. and Street: 2: City or Town: W 6. Mailing Address of Contact Name: ILIA: No. and Street: 23	LDINGS ddress 3 WASHINGTON STREET VEST WARWICK State: RI of Limited Liability Company and Name or Titl S ZAROKOSTAS Contact Title:	Zip: <u>02893</u> Country: <u>USA</u> e of Contact Person:
REAL ESTATE HO 5. Principal Office Ad No. and Street: 2: City or Town: W 6. Mailing Address of Contact Name: ILIA: No. and Street: 23 City or Town: W	Address 3 WASHINGTON STREET VEST WARWICK State: RI of Limited Liability Company and Name or Title S ZAROKOSTAS Contact Title: 3 WASHINGTON STREET 2 EST WARWICK S S of Each Manager of the Limited Liability Company	Zip: <u>02893</u> Country: <u>USA</u> e of Contact Person: Zip: <u>02893</u> Country: <u>USA</u>
REAL ESTATE HO 5. Principal Office Ad No. and Street: 2: City or Town: W 6. Mailing Address of Contact Name: ILIA: No. and Street: 23 City or Town: W 7. Name and Address	Address 3 WASHINGTON STREET VEST WARWICK State: RI of Limited Liability Company and Name or Title S ZAROKOSTAS Contact Title: 3 WASHINGTON STREET 2 EST WARWICK S S of Each Manager of the Limited Liability Company	Zip: <u>02893</u> Country: <u>USA</u> e of Contact Person: Zip: <u>02893</u> Country: <u>USA</u>

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

ILIAS ZAROKOSTAS 23 WASHINGTON STREET WEST WARWICK , RI 02893

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 27 Day of September, 2017 at 11:44:31 AM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By ILIAS ZAROKOSTAS

Signature of Authorized Person

Form No. 632 Revised 09/07

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