

Annual Report for the year: 2017
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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2017 OCT -3 PM 12: 47

1. Entity iD Number 001666946		2 Exact name of the Limited Liability Company ESPINAL RESTAURANT LLC				
3. NAICS Code 722513	II	Brief description of the character of business conducted in Rhode Island     LIMITED RESTAURANT FOR HUMAN CONSUMPTION				
5. State of Formation RHODE ISLAND						
6 Principal Office Address 564 PLANFIELD STREET			C ty PROVIDENCE	State RI	Zip 02909	
7. Mailing Address of Limited	Liability Compa	any and Name o				
Contact Name CLAUDIA EUGENIA GUEVARA			Contact Tille President			
Street Address 564 PLAINFIELD STREET			City PROVIDENCE	State RI	<sup>Z·p</sup> 02909	
8 List ALL managers (name	s and addresse:	s) of the Limited	Liability Company, IF APPLICABL	E - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
C.ty	S:ale	Zρ	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
C ty	State	Zıp	C-ly	State	Zp	
	1	l		Check the box to	indicate an attachment	
9. Resident Agent in Rhode I	siand. This inform	nation is currently	of record with the Department of State	Changes require file	ng Form 642.	
Under penalty of perjury, I statements, and that all sta			examined this report, including true and correct.	any accompanyin	ng schedules and	
Name of Authorized Person				Date		
CLAUDIA EUGENIA GUEVARA				9	217-17	
Signature of Authorized Pers	on G	Thorn				

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** 

OCT 03 2017 BY 313931

FORM 6, 2 - Revising, 08/2017