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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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- Tanaty, Additional \$2		a not lited by De		319	850		
l. Entity ID Number	2. Exact na	me of the Limite	d Liability Company	T			
115930	Buc	BUCCI'S COMBINATION STORE, LLC					
. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island					
445310	* ALC	* ALCOHOL BEVERAGES SALES					
-≛ . State of Formation	<b>  +</b> GR.	OCBR4 5	SALES				
RI		,					
. Principal Office Address			City	State	Zip		
1-3 THAMES STREET			NEWPORT	RI	02840		
. Mailing Address of Limite	d Liability Compa	ny and Name oi			·		
Contact Name ELIZABETH BUCCI			Contact Title OLINER				
Street Address 1-3 Thames Street			City NEWPORT	State RI	Zip 2840		
. List ALL managers (nam	es and addresse	s) of the Limited	Liability Company, IF APPLICABI	LE - DO NOT LIST	MEMBERS		
fanager Name			Manager Name	Manager Name			
Street Address			Street Address				
City	State	Zip	City	State	Zip		
fanager Name		<u> </u>	Manager Name		- <del></del>		
Street Address			Street Address				
City	State	Žip	City	State	Zip		
				Check the box to	indicate an attachment		
). Resident Agent in Rhod	e Island. This Infor	mation is currently	of record with the Department of Sta	te. Changes require t	ling Form 642.		
Under penalty of perjury, statements, and that all s			examined this report, including true and correct.	g any accompany	ing schedules and		
Name of Authorized Perso				Date			
ANTHONY A.	Bucc	i ONL	BEHALF of Elizad	eth 12	114/17		
Signature of Authorized Pe	erson		Bull	i			
Centhonyl	2(2) A						
* CURRENT	CONTAC	T INTO	RMATION:				
			ELIZAKE	th Buc	e i		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov ELIZABETH BUCCI ANTHONY A. BULLI 15 GOOSEBERRY ROAD NEWPORT, RI 02840 (401) 847-6172 \* RESIDENCE.