



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

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 CORPORATIONS DIV

2017 DEC 14 PM 12:00

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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.

1. Entity ID Number 115930		2. Exact name of the Limited Liability Company Bucci's COMBINATION STORE, LLC	
3. NAICS Code 445310		4. Brief description of the character of business conducted in Rhode Island * ALCOHOL BEVERAGES SALES * GROCERY SALES	
5. State of Formation RI			
6. Principal Office Address 1-3 THAMES STREET		City NEWPORT	State RI
		Zip 02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name ELIZABETH BUCCI		Contact Title OWNER	
Street Address 1-3 THAMES STREET		City NEWPORT	State RI
		Zip 02840	
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
			State
			Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
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 Anthony A. Bucci... on behalf of Elizabeth			Date 12/14/17
Signature of Authorized Person <i>Anthony A. Bucci</i>			BUCCI

* CURRENT CONTACT INFORMATION:

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. BUCCI
15 GOOSEBERRY ROAD
NEWPORT, RI 02840
(401) 847-6172
*** RESIDENCE.**