Filing Fee: \$50.00

To be filed annually between September 1 and November 1

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

### LIMITED LIABILITY COMPANY

D	ID Number FLLC 93021 An	nual Report for the year 2001	
1.	The name of the limited liability company is:		
	R.K. Newport, LLC.		
2.	2. The address of the principal office of the limited liability company	is:	
	456 Providence Hwy Dedhar	n. MA 1 27	
3.	3. The state or other jurisdiction under the laws of which it is f	rown	
4.	4. The name and address of its resident agent is: HARRY KA		
	HARRY'S LIQUOR STORE 199 CONNELL HIGHWAY NEI	miner	
5.	5. The current mailing address of the limited liability company	to whom communications	
	may be directed are: P.O. Box III; Ded. 10	MY1, 111H 02027-0111	
	Attn: David Kat	ΓZ	
6. 7.	state: Real Estate Holdings and Management		
	Sabra Katz 456 Provid	dence Hwy Dedham, MA dence Hwy Dedham, MA dence Hwy Dedham, MA	
Da	report, including a that all statements of R.K. Ne	erjury, I declare and affirm that I have examined this ny accompanying schedules and statements, and contained herein are true and correct.  IN THE INTERIOR OF LIMITED LIABILITY COMPANY	
	FOR SECRETARY OF STATE USE ONLY File Date:  Check No.:  By  Manual State USE ONLY  By  Manual State US	Wager Title	
3v:	BV: Ze	Form No. 632 Revised 01/99	

Filing Fee: \$50.00

# To be filed annually between September 1 and November 1

Revised 01/99



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By:

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

# LIMITED LIABILITY COMPANY

ID	Number FLLC 93021	Annual Report for the year 2000	
1.	The name of the limited liability company is:		
	R.K. Newport, LLC.		
2.	The eddress of the principal office of the limited liability company is:		
	456 Providence	Highway; Dedham, MA 02027	
3.		the laws of which it is formed is MASSACHUSETTS	
4.	The name and address of its resident agent is: HARRY KARANIKOLAS, INC.		
	HARRY'S LIQUOR STORE 199 COI	NNELL HIGHWAY NEWPORT RI 02840	
5.	i. The current mailing address of the limited liability company and the name or title of a person to whom communicati		
	may be directed are:	Box 111: Decham, MA 02027	
Attn: David Katz			
6.	s. A brief statement of the character of the business in which the limited liability company is actually engaged in th		
	state: Real Estate	Holdings and Management	
7.	. If the limited liability company has managers, the name and address of each manager of the limited liability compan  Name  Address		
	David Katz	456 Providence Highway; Dedham, MA 456 Providence Highway; Dedham, MA	
		456 Providence Highway: Dedhun, MA	
	Kaanan Katz	456 Prividence Highway; Dedham, MA	
Dated 9 11 00 Under penalty of perjury, I declare and affirm that I have ex			
report, including any a		report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.	
	9 3 0 2 1	R. K. Newport, LLC.  Exact Name of Limited Liability Company	
	FOR SECRETARY OF STATE USE ONLY	$\Omega = \Omega / \Omega = 0$	
File	Date: $9/20$	By Manager	
Ch	ock No.: 15571	Manager Tido	
!	_	Form No. 632	

Filing Fee: \$50.00

To be filed annually between September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

LIMITED LIABILITY COMPANY					
ID	Number FL 93021	Annual Report for the year 1999			
1.	The name of the limited liability company is:	: 			
2.	The address of the principal office of the lim	ited liability company is: Newton, MA 02459			
3.	The state or other jurisdiction under the law	s of which it is formed is MASSACHUSETTS			
4.	The name and address of its resident agent	tis: HARRY KARANIKOLAS, INC.			
	HARRY'S LIQUOR STORE 199 CONNELL	HIGHWAY NEWPORT, RI 02840			
5.	·	ability company and the name or title of a person to whom communications  Ivenue: Newton, MA 02459  Katz			
6.					
	_	lings and Management			
7.		s, the name and address of each manager of the limited liability company  Address			
	David Katz Sabra Katz Raanan Katz	181 Wells Ave: Newton, MA 181 Wells Ave.; Newton, MA 181 Wells Ave.; Newton, MA			
Da	* 9 3 0 2 1 *	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.  R. K. Newpost, LLC  Exact Name of Limited Liability Company			
File	FOR SECRETARY OF STATE USE ONLY Date: 4-22-99  ck No.: 13962	By Manager			
3v:	AMF	✓itle Form No. 632 Revised 01/99			



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State **Corporations Division** 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

## LIMITED LIABILITY COMPANY

ID	Number FL 93021	Annual Report for the year 1998		
1.	The name of the limited liability company is	:		
	R.K. Newport, LLC.			
2.	The address of the principal office of the lin	nited liability company is:		
	181 WELLS AVE, NEWTO	N MA 02459		
3.	The state or other jurisdiction under the law	vs of which it is formed is MASSACHUSETTS		
4.	The name and address of its resident agen	t is: HARRY KARANIKOLAS, INC.		
	HARRY'S LIQUOR STORE 199 CONNELL			
5	5. The current mailing address of the limited liability company and the name or title of a person to who			
J.	-			
		181 WELLS AVE , NEWTON MA 02459		
	ATTN: DAVID KATZ			
6.	6. A brief statement of the character of the business in which the limited liability company is actually engaged in th			
	state: REAL ESTATE Hou	DINGS & MANAGEMENT		
7.	If the limited liability company has manage Name	rs, the name and address of each manager of the limited liability, company  **Address**		
	DAVID KATZ	181 Wells Ave Newton MA 02459		
	SABRA KATZ	181 Wells Ave Newton MA 02459		
	RAANAN KATZ	181 Wells five, Newton MA 02459		
Da	ated	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.    R. Newport LLC.     Exact Name of Limited Liability Company		
·File	FOR SECRETARY OF STATE USE ONLY  Date: 10.7.98	11 1/1		
che	eck No.: 12460	By \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
Ву	1 f ID	- Magel		
		Form No. LLC-19		