



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

STAMP

Annual Report for the year: **2018**
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 795117		2. Exact name of the Limited Liability Company AMERICAN BISTRO, LLC			
3. NAICS Code 722511		4. Brief description of the character of business conducted in Rhode Island FULL-SERVICE RESTAURANT			
5. State of Formation RI					
6. Principal Office Address 122 TOURO STREET		City NEWPORT		State RI	Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name TURNER C. SCOTT			Contact Title REGISTERED AGENT		
Street Address 122 TOURO 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 Joann Carlson - Klein		Manager Name			
Street Address 24 Memorial Blvd West		Street Address			
City NEWPORT	State RI	Zip 02840	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 JOAN CARLSON-KLEIN				Date 8.21.2018	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

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

AUG 27 2018

BY

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FORM 632 - Revised: 10/2017