



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

Annual Report for the year: 2018
Corporation

- Filing period: January 1 - March 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

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SECRETARY OF STATE
CORPORATIONS
2018 SEP 24 AM 9:31
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1. Entity ID Number 000143457		2. Exact name of the Corporation G. Lounge Inc.	
3. Principal Office Address 349 Dyer Ave Cranston		City Cranston	State RI
4. NAICS Code 722410	6. Brief description of the character of business conducted in Rhode Island TO OWN and operate Restaurants, Bar's Night clubs, Lounges		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Sergio Rodriguez		Vice-President Name	
Street Address 349 Dyer Ave		Street Address	
City Cranston	State RI	City	State
Zip 02920		Zip	
Secretary Name		Treasurer Name Monica Rodriguez	
Street Address		Street Address 10 Donna's Way	
City	State	City Coventry	State RI
Zip		Zip 02816	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized		10. Shares Issued 100 Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State.		NUMBER OF SHARES	
Changes require an additional filing.		CLASS/SERIES	
		PAR VALUE	
		100	
		Stock	
		0	
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.			
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 Representative			Date 9/24/18
Signature of Authorized Representative Sergio Rodriguez			FILED

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