



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

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.

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 BUS SVCS DIV
 2018 OCT 31 PM 12:36

1. Entry ID Number 1675022		2. Exact name of the Limited Liability Company Khaosan, LLC	
3. NAICS Code 722513		4. Brief description of the character of business conducted in Rhode Island Restaurant	
5. State of Formation Rhode Island			
6. Principal Office Address 332 Warren Avenue		City East Providence	State RI
		Zip 02914	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Wilaiporn Binhasan Pappas		Contact Title Member	
Street Address 1890 Broad Street, Apt 220		City Cranston	State RI
		Zip 02905	
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	City	State
Zip		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Check the box to indicate an attachment ☐			
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 Wilaiporn Binhasan Pappas, Member		Date 10/25/18	
Signature of Authorized Person <i>[Signature]</i>		SIGNATURE 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

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 OCT 31 2018
 BY **729X8**
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