



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

NOV 13 2018

BY

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[Signature]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 1341105		2. Exact name of the Limited Liability Company SHOOBIES, LLC			
3. NAICS Code 722511		4. Brief description of the character of business conducted in Rhode Island RESTAURANT			
5. State of Formation RI					
6. Principal Office Address 1814 BOSTON NECK ROAD			City SAUNDERSTOWN	State RI	Zip 02874
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MARIA DOLOS			Contact Title MANAGER		
Street Address P.O. BOX 67			City SAUNDERSTOWN	State RI	Zip 02874
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Maria Dolos			Manager Name		
Street Address P.O. Box 67			Street Address		
City Saunderstown	State RI	Zip 02874	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.					
<i>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.</i>					
Name of Authorized Person MARIA DOLOS				Date 10-25-18	
Signature of Authorized Person [Signature]				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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