RI SOS Filing Number: 201881572460 Date: 11/19/2018 4:00:00 PM

Į	خد
•	(जित्र)

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.

ETAMP

1 Entity ID Number 567026	I	2. Exact name of the Limited Liability Company					
3. NAICS Code 424870	4. Brief de	4. Brief description of the character of business conducted in Rhode Island Wine Merchant					
5. State of Formation RI							
6. Principal Office Address			City	State	Zip		
848 Hope Street			Providence	RI	02806		
7. Mailing Address of Limited		any and Name o			<u> </u>		
Contact Name Abraham A. Saleh			Contact Title Owner				
Street Address 848 Hope Street			City Providence	State RI	^{Zip} 02806		
8. List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLICAE	BLE - DO NOT LIST	MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
		<u> </u>	<u></u>	Check the box to i	ndicate an attachment		
			of record with the Department of Sta	ite. Changes require filir	ng Form 642		
Under penalty of perjury, I o statements, and that all sta	declare and aff tements conta	firm that I have ined herein are	examined this report, including true and correct.	g any accompanyin	g schedules and		
Name of Authorized Person		Date					
Raymond F. Bruzzese				11/09/2018			
Signature of Authorized Person	Bn	ŞIGN	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

NOV 1 9 2018 KM

7057