



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.

1. Entity ID Number 001674925		2. Exact name of the Limited Liability Company VM MOONLIGHT #2 LLC			
3. NAICS Code 722513		4. Brief description of the character of business conducted in Rhode Island FAST FOOD RESATURANT			
5. State of Formation RI					
6. Principal Office Address 175 EDDIE DOWLING HIGHWAY		City NORTH SMITHFIELD	State RI	Zip 02896	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name NAGLAA IBRAHIM			Contact Title MANAGER		
Street Address 344 GRANDVIEW AVE		City WOONSOCKET	State RI	Zip 02895	
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		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 NAGLAA IBRAHIM				Date 3/19/2019	
Signature of Authorized Person <i>Naglaa Ibrahim</i> DOCUMENT HERE					

FILED

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

MAR 29 2019
 BY 125 OS