RI SOS Filing Number: 201994892840 Date: 5/29/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

2019 MAY 29 PH 12: 23

Annual Report for the year: **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	2. Exact name of the Limited Liability Company				
000970465	A&M bakery C.C.C.				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
311812	<i>C</i> ,	- 1			
5. State of Formation	Fast	1-00/1 /	And Bakery		
RĪ			,		
6. Principal Office Address			City	State	Zip
723 Broad St. Central Ralls			Central Falls	State 2T	02863
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Adriana Moncada			Contact Title Our		
Street Address 122 Onlands Urlue			City North Providence	<u>-</u>	
8. List ALL managers (names and addresses) of the Limited Liability Company, tF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name :			Manager Name		
Street Address			Street Address		
City -	State,	Zin	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
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 Date					
Octavis Munor 05/29/19					
Signature of Authorized Persen					
				-u FD	

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence. Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov