



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

Annual Report for the year: **2019**
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.

FILED
OCT 21 2019
31897
FOR
THE
STATE
CLERK

1. Entity ID Number 795117		2. Exact name of the Limited Liability Company AMERICAN BISTRO, LLC	
3. NAICS Code 722511		4. Brief description of the character of business conducted in Rhode Island FULL-SERVICE RESTAURANT	
5. State of Formation RI			
6. Principal Office Address 122 TOURO STREET		City NEWPORT	State RI Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name TURNER C. SCOTT		Contact Title REGISTERED AGENT	
Street Address 122 TOURO STREET		City NEWPORT	State RI Zip 02840
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name Joann Carlson-Klein		Manager Name	
Street Address 24 Memorial Blvd		Street Address	
City Newport	State RI	Zip 02840	
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 JOAN CARLSON-KLEIN		Date 9-16-2019	
Signature of Authorized Person 		SIGN 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