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SEDRETARY OF STATE
CORPORATIONS DIVIP

2019 NOV 27 PH 2: 05.

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.

| 1. Entity ID Number | 2. Exact name of the Limited Liability Company | | | | |
|--|---|-----|----------------------|----------|----------------------|
| 000809942 | CIGAR WORLD, LLC | | | | |
| 3. NAICS Code | 4. Brief description of the character of business conducted in Rhode Island | | | | |
| 812990 | Cigar Bar | | | | |
| 5. State of Formation | | | | | |
| Rhode Island | | | | | |
| 6. Principal Office Address | | | City | State | Zip |
| 686 Reservoir Avenue | | | Cranston | RI | 02910 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | |
| Contact Name Rosadina L. Acosta Davidson | | | Contact Title Member | | |
| Street Address 12 Long Lane | | | City Warren | State RI | ^{Zip} 02885 |
| 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 | City | State | Zip |
| Manager Name | | | Manager Name | | |
| Street Address | | | Street Address | | |
| City | Stale | Zip | City | State | Zip |
| 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 | | | | | |
| Rosadina L. Acosta Davidson, Member | | | | | 7019 |
| Signature of Authorized Person SIGN LOCUMENT 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 FILED C

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FORM 632 - Revised, 08/2017