



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 *8*
 NOV 29 2019
 19-039954078

1. Entity ID Number 000536441		2. Exact name of the Limited Liability Company SMOKEEZ SMOKE SHOP LLC			
3. NAICS Code 453991		4. Brief description of the character of business conducted in Rhode Island RETAIL SMOKE SHOP AND ACCESSORIES			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 1911 WESTMINSTER STREET			City PROVIDENCE	State RI	Zip 02908
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name EUFROSINA PACHECO			Contact Title ACCOUNTANT		
Street Address 162 BROAD STREET			City PAWTUCKET	State RI	Zip 02860
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
				NY	
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 KARINA INDILLCATI				Date 09/06/2019	
Signature of Authorized Person <i>Karina Indillicati</i>					

MAIL TO:
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