



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Certificate Request Form

Request Information

ID	ENTITY NAME	CERTIFICATE TYPE
000064127	NEWPORT PLAYHOUSE and CABARET RESTAURANT INC.	Certificate of Good Standing

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: Jonathan Perry

Business Name: Newport Playhouse & Cabaret Restaurant

No. and Street: PO Box 451

City or Town: Newport

State: RI

Zip: 02840

Country: USA

Contact Phone: 4018620625 ext:

Contact Email: audrey@newportplayhouse.com