

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

SECONDONATIONS TATE

2020 JAN 28 PM 1: 45

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.

| Entity ID Number | 2. Exact name of the Limited Liability Company | | | | |
|--|--|------------|----------------|----------|-----------|
| A1 FDF 000 | Honduras Restaurant, UC | | | | |
| 3. NAICS Code | Brief description of the character of business conducted in Rhode Island | | | | |
| 722513 | | | | | |
| 5. State of Formation | | | | | |
| [Z] | Kestaurant | | | | |
| 6. Principal Office Address | | | City | State | Zip |
| 175 manton Aug | | | Providence | 125 | 02909 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | |
| Contact Name Caloria M Dominaurz | | | Contact Title | | |
| 101011111111111111111111111111111111111 | | | cityProvidence | State ZI | zip 02908 |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS | | | | | |
| Manager Name GLO MO DOMINGUEZ | | | Manager Name | | |
| Street Address 139 Orms SA | | | Street Address | | |
| Providence | State 27 | Z1p 07.20% | 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 | | | | | |
| Gloria Dominquez | | | | | slia |
| Signature of Authorized Person | | | | | |
| Joria Wimigue | | | | | |

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

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FORM 632 - Revised: 10/2017