



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2020 JUL 30 PM 4:17

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 001684494		2. Exact name of the Limited Liability Company MAGGIES' RESTAURANT LLC			
3. NAICS Code 722511		4. Brief description of the character of business conducted in Rhode Island RESTAURANT			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 13 KATHY AVENUE		City COVENTRY		State RI	Zip 02816
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JOSEPH RAHEB			Contact Title ATTORNEY		
Street Address 650 GEO. WASHINGTON HWY, SUITE 200			City LINCOLN		State RI Zip 02865
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name NONE			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 BENJAMIN LAPIERRE				Date 7/29/20	
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

FILED

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BY **Ch 388RX**

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