RI SOS Filing Number: 202059052300 Date: 9/29/2020 10:37:00 AM



## State of Rhode Island Office of the Secretary of State

Fee: \$50.00

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

## Limited Liability Company Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2020

**1. ID No.** 001697821

- 2. Exact Name of the Limited Liability Company Baron Ventures LLC
- 3. State of Formation

State: RI

## **ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.

<u>451120</u>

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

BARON VENTURES LLC DBA BLACKSTONE VALLEY BREWING SUPPLIES SELLS
MERCHANDISE FOR THE HOBBY OF HOMEBREWING. MERCHANDISE INCLUDES DRY
GOODS - GRAINS, YEAST, HOPS, BOTTLES, CAPS, BREWING EQUIPMENT, DRAFT
LINES. NO LIQUOR IS SOLD ON PREMISES. ONLY INGREDIENTS TO DO THE HOBBY OF
HOMEBREWING AT HOME.

## 5. Principal Office Address

No. and Street: 403 PARK AVE.

City or Town: WOONSOCKET State: RI Zip: 02895 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: LAURA BARON Contact Title: OWNER

No. and Street: 403 PARK AVE

City or Town: WOONSOCKET State: RI Zip: 02895 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name	Address
ritie	individual Name	Address

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	LAURA ELIZABETH BARON	403 PARK AVE. WOONSOCKET, RI 02895 USA
MANAGER	CHARLES BARON	403 PARK AVE. WOONSOCKET, RI 02895 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

LAURA ELIZABETH BARON 94 SAINT MARCEL ST. WOONSOCKET, RI 02895

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 29 Day of September, 2020 at 10:39:39 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By <u>LAURA BARON</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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