State of Rhode Island	
Department of State - Business Services Division	
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Annual Report for the year: 2020	• •
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	To c						
·	2. Exact name of the Limited Liability Company						
1686843	Broccoli-Thompson Enterprises, LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
722513	Subway Sandwich Shop						
5. State of Formation							
Rhode Island							
6. Principal Office Address	<u> </u>		City	State	Zıp		
1455 Mineral Spring Avenue			North Providence	RI	02904		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Patricia Thompson			Contact Title Member				
Street Address 104 Osaga Drive			City Warwick	Stale RI	Z ₁ p 02888		
8 List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zip		
			-	Check the box to it	ndicate an attachment		
9. The Resident Agent information currently of record with the RI Department of State is accurate. 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 (
Patricia Thompson							
Signature of Authorized Person. hours							

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos ri gov

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