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State of Rhode Island  Department of State - Business Services	Division
	State of Rhode Island  Department of State - Business Services

Annual Report for the year: 2020 Limited Liability Company FILED 500 OCT 1 5 2020

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

2362
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1. Entity ID Number 645194	2. Exact name of the Limited Liability Company ABC FISH, LLC						
3. NAICS Code 445220 5. State of Formation	Brief description of the character of business conducted in Rhode Island     Retail Seafood Market						
RI							
6. Principal Office Address	<del> </del>		City	State	Zip		
222 North Main Street			Stonington	СТ	06378		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Michael Pugliese			Contact Title President				
Street Address 220 North Main Street		City Stonington	State CT	Zip 06378			
8. List ALL managers (names a	nd addresses)	of the Limited Lial	bility Company, IF APPLICA	BLE - DO NOT LIST N	MEMBERS		
Manager Name Michael Pugliese			Manager Name				
Street Address 220 North Main Street			Street Address				
City Stonington	State CT	Zip 06378	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	1			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							
Michael Pugliese 10/13/20					13/20		
Signature of Authorized Person							

MAIL TO:

**Division of Business Services** 

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

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