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BUS SYCS DIV

2020 OCT 23 'A- 9:041

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	2. Expert name of the Limited Linklity Company				
001701551	Exact name of the Limited Liability Company Braza Bar & Grill LLC				
001701331	ia Braza Bar & Griii LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
722511	EATING AND DRINKING PLACE				
5. State of Formation					
RI					
6. Principal Office Address			City	State	Zip
187 Elmwood Avenue			PROVIDENCE	RI	02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name BRYAN G. RIVAS			Contact Title PRESIDEN		
Street Address 51 SUPERIOR STREET, APT. 2			City PROVIDENCE	State RI	^{Zip} 02907
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	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
 		<u> </u>	Ch	eck the box to inc	dicate 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	
BRYAN G. RIVAS	1		10/14	10/14/2120	
Signature of Authorized Person					

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**

OCT 23 2020

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