RI SOS Filing Number: 202071439400 Date: 11/4/2020 4:00:00 PM

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partment of State - Business Services Division

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 001698685	2. Exact nam S.D. BISON	P					
3. NAICS Code 53110 5. State of Formation Rhode Island	4. Brief description of the character of business conducted in Rhode Island Own and sell real estate Title: 7-16						
6. Principal Office Address 4184 Post Road			City East Greenwich	State - RI	Zip 02818		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Wissam Boumjahed			Contact Title				
Street Address 4184 Post Road			City East Greenwich	State RI	Zip 02818		
8. List ALL managers (names ar	nd addresses)	of the Limited Liabi	ility Company, IF APPLICABLE	- DO NOT LIST ME	MBERS		
Manager Name			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	Zıp		
	•		(Check the box to indi	icate 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 dec statements, and that all staten				ny accompanying s	schedules and		
Name of Authorized Person Wissam Boumjahed				Date 11, 2, 2 o			
Signature of Authorized Person	1,0	1					

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 M

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