



State of Rhode Island
Department of State - Business Services Division

FILED

NOV 25 2020

BY *[Signature]*

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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 00790991		2. Exact name of the Limited Liability Company Alpha Distributors			
3. NAICS Code 424820		4. Brief description of the character of business conducted in Rhode Island Wholesale distribution of wine, beer and spirits			
5. State of Formation RI					
6. Principal Office Address 14 Minnesota Ave. Apt. 1			City Warwick	State RI	Zip 02888
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Walter Kaczynski			Contact Title President		
Street Address 3 Ridgewood Road			City Burlington	State CT	Zip 06013
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	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 Walter Kaczynski <i>[Signature]</i>				Date 11/23/2020	
Signature of Authorized Person <i>[Signature]</i>					

MAIL TO:
 Division of Business Services
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