

Annual Report for the year: 2014 Limited Liability Company

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R.I. DEPT. OF STATE A AMBUS SVCS DIV

2021 FEB 18 AM 9: 16

→ 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 000507435	I	Exact name of the Limited Liability Company NJMA, LLC				
3. NAICS Code 722511		Brief description of the character of business conducted in Rhode Island EAT IN OR TAKE OUR RESTAURANT				
5. State of Formation RI						
6. Principal Office Address 1633 WARWICK AVE			City WARWICK	State RI	Zip 02889	
7. Mailing Address of Limite	d Liability Compa	iny and Name o	r Title of Contact Person			
Contact Name NICHOLAS J DEGAITAS			Contact Title MEMBER			
Street Address 1633 WARWICK AVE			City WARWICK	State RI	Zip 02889	
8. List ALL managers (name	es and addresses	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS 55	
Manager Name			Manager Name		। ୩ ୫ । ନେଟ ନବ୍ୟ	
Street Address			Street Address		-3	
City	State	Zip	City	State	So Continue	
Manager Name			Manager Name ∴ < >>			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to	indicate an attachment	
9. The Resident Agent infor	mation currently	of record with the	e RI Department of State is accu	ırate. Changes requir	re filing Form 642.	
Under penalty of perjury, s statements, and that all st			examined this report, including true and correct.	g any accompanyin	ng schedules and	
Name of Authorized Person NICHOLAS J DEGAITAS			Date 2/12/21			
Signature of Authorized Per	son					

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

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A.A. 3.20pm