



State of Rhode Island

Department of State - Business Services Division

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2021 MAY 21 P 4:23

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 001691801		2. Exact name of the Limited Liability Company Taste of Africa Market LLC			
3. NAICS Code 445110		4. Brief description of the character of business conducted in Rhode Island African and caribbean groceries			
5. State of Formation Rhode Island					
6. Principal Office Address 306 Cranston Street		City Providence	State RI	Zip 02907	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Stephen Idahosa		Contact Title Business Owner			
Street Address 50 Job Street, Unit 1		City Providence	State RI	Zip 02904	
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 ☐					
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 Stephen Idahosa			Date May 21 2021		
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

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