



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021
Corporation

- Filing period: January 1 - March 1
 → Filing Fee: \$50.00
 → Penalty: Additional \$25.00 fee if form is not filed by April 1.

FRI

JUN 02 2021

CY- 16677

1. Entity ID Number 2867		2. Exact name of the Corporation BRISTOL COUNTY SPIRITS			
3. Principal Office Address 601 METACOM AVE			City WARREN	State RI	Zip 02885
4. NAICS Code 445310		6. Brief description of the character of business conducted in Rhode Island RETAIL LIQUOR STORE			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name CHRISTOPHER BRITO			Vice-President Name		
Street Address 99 TUPELO STREET			Street Address		
City BRISTOL	State RI	Zip 02809	City	State	Zip
Secretary Name CHRISTOPHER BRITO			Treasurer Name CHRISTOPHER BRITO		
Street Address 99 TUPELO STREET			Street Address 99 TUPELO STREET		
City BRISTOL	State RI	Zip 02809	City BRISTOL	State RI	Zip 02809
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name CHRISTOPHER BRITO			Director Name		
Street Address 99 TUPELO STREET			Street Address		
City BRISTOL	State RI	Zip 02809	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIALS		
			PAR VALUE		
2,000			COMMON		
			0		
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
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 Representative CHRISTOPHER BRITO					Date 05/28/2021
Signature of Authorized Representative					

MAIL TO:
 Division of Business Services
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 Phone: (401) 222-3040
 Website: www.sos.ri.gov