



State of Rhode Island

Department of State - Business Services Division

FILED

SEP 10 2021

BY DR 8111Annual Report for the year: 2021

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 000114499		2. Exact name of the Limited Liability Company AVALON ENTERTAINMENT, LLC			
3. NAICS Code 425110		4. Brief description of the character of business conducted in Rhode Island to operate in the coin operated vending machine business			
5. State of Formation RI					
6. Principal Office Address 76 Douglas Pike			City Smithfield	State RI	Zip 02917
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name John Perrotta			Contact Title Authorized Person		
Street Address 400 Putnam Pike, Suite J504			City Smithfield	State RI	Zip 02917
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.					
<i>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.</i>					
Name of Authorized Person Gene M. Carlino, Esq.				Date 8/31/2021	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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