



State of Rhode Island

Department of State - Business Services Division

 RECEIVED
 RI DEPT. OF STATE DEPT. OF STATE
 BUS SVCS DIV BUS SVCS DIV

2023 FEB -1 PM 2:02 JAN 12 PM 1:25

Annual Report for the year: 2023

Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

| | | | |
|--|--|--|--|
| 1. Entity ID Number <u>1716690</u> | | 2. Exact name of the Limited Liability Company <u>ANAVA Foods LLC</u> | |
| 3. NAICS Code <u>445110</u> | | 4. Brief description of the character of business conducted in Rhode Island <u>GROCERY / Food Service</u> | |
| 5. State of Formation <u>RI</u> | | | |
| 6. Principal Office Address <u>727 Hope Street</u> | | City <u>Providence</u> | State <u>RI</u> Zip <u>02906</u> |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name <u>Jeffrey Ingber</u> | | Contact Title <u>OWNER</u> | |
| Street Address <u>727 Hope Street</u> | | City <u>Providence</u> | State <u>RI</u> Zip <u>02906</u> |
| 8. 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 <u>Jeffrey P. Ingber</u> | | Date <u>01/03/23</u> | |
| Signature of Authorized Person | | | |

FILED

1:28

FEB 1 2023

BY AA9RY

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov