



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

FILED

MAR 17 2023

RY 7952

1. Entity ID Number 1699236		2. Exact name of the Corporation Common Pub & Grille, Inc.			
3. Principal Office Address 421 Wood Street			City Bristol	State RI	Zip 02809
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island To own and operate a restaurant and bar and all legally related endeavors			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Courtney Poissant			Vice-President Name Courtney Poissant		
Street Address 421 Wood Street			Street Address 421 Wood Street		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name Courtney Poissant			Treasurer Name Courtney Poissant		
Street Address 421 Wood Street			Street Address 421 Wood 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 <input type="checkbox"/>					
Director Name Courtney Poissant			Director Name		
Street Address 421 Wood 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 This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	Common	No Par Value
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 Courtney Poissant					Date 2/17/23
Signature of Authorized Representative 					

MAIL TO:

Division of Business Services

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