RI SOS Filing Number: 202331902390 Date: 3/28/2023 3:40:00 PM



State of Rhode Island

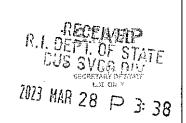
## **Department of State - Business Services Division**

Annual Report for the year:  $\frac{2022}{}$ **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 000799237	Exact name of the Limited Liability Company Changarro Restaurant, Ilc  Brief description of the character of business conducted in Rhode Island BAR AND RESTAURANT			
3. NAICS Code 722511				
5. State of Formation 05/23/2013				
6. Principal Office Address		City	State	Zip
519 HARTFORD AVENUE	• •	PROVIDENCE	RI	02909
7. Mailing Address of Limite	d Liability Company and Name or Tit	tle of Contact Person	<u> </u>	<b>t</b>
Contact Name RAFAELINA MARTINEZ		Contact Title MEMBER		
Street Address 519 ALTHEA ST APT 1		City PROVIDENCE	State RI	<sup>Zip</sup> 02907
8. The Resident Agent infor	mation currently of record with the R	I Department of State is accur	rate. Changes requir	e filing Form 642.
Under penalty of perjury,	declare and affirm that I have exa atements contained herein are tru	mined this report, including		
Name of Authorized Person			Date	
RAFAELINA MARTINEZ			03/28/2023	
Signature of Authorized Per	son Meurle			
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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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