



State of Rhode Island  
**Department of State - Business Services Division**

MAY 03 2023 4:00 PM

5922 *[Handwritten initials]*

**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 001690849		2. Exact name of the Limited Liability Company B.A. Beverage Company, LLC	
3. NAICS Code 722511		4. Brief description of the character of business conducted in Rhode Island Full service restaurant	
5. State of Formation Rhode Island			
6. Principal Office Address 139 Winsor Avenue		City Johnston	State RI
		Zip 02919	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name William Christina		Contact Title Member	
Street Address 139 Winsor Avenue		City Johnston	State RI
		Zip 02919	
8. 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 <i>William Christina</i>		Date <i>4/7/23</i>	
Signature of Authorized Person <i>[Handwritten Signature]</i>			

**MAIL TO:**  
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