	State of Office of the State	Rhode Island Secretary of		Fee: \$50.00
7636	Division Of 148 W. Providence	Business Servi River Street RI 02904-261 222-3040	ces	
Limited Liabilit Annual Report Filing Period: Feb				
refusing to file its	h R.I.G.L. 7-16-66(d), each limited annual report within thirty (30) da -66(b&c)) is subject to a penalty fo	ys after the tim		/
ANNUAL REPOR	T YEAR - ENTER THE <u>CURRENT</u> I	FILING YEAR 2	2023: <u>2023</u>	
1. ID No. <u>00</u> 2	015166			
2. Exact Name	of the Limited Liability Company	BT Hotel War	wick Concessio	on LLC
3. State of Forn	nation			
State: <u>DE</u>				
	NAICS	CODE		
-	t NAICS Code that best describes t of codes <u>here.</u> More information			•
<u>722511</u>				
4. Brief Descript Island	ion of the Character of the Busin	ess Which is A	Actually Condu	cted in Rhode
HOTEL & RES	TAURANT			
5. Principal Offi	ce Address			
No. and Street:	<u>5 WEST 86TH STREET</u> <u>12E</u>			
City or Town:	NEW YORK	State: <u>NY</u>	Zip: <u>10024</u>	Country: <u>USA</u>
6. Mailing Addre	ss of Limited Liability Company	and Name or T	itle of Contact	Person:
Contact Name:	ASAF BAR NATAN Contact Title: <u>5 WEST 86TH STREET</u>			
No. and Street:	12E			

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE , RI 02914

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 13 Day of July, 2023 at 5:09:12 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By ASAF BAR NATAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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