



State of Rhode Island  
Department of State - Business Services Division

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.

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BUS SVCS DIV

2023 AUG -1 A 10:30

1. Entity ID Number <b>001662598</b>		2. Exact name of the Limited Liability Company <b>White Horser Vapor Stores LLC</b>	
3. NAICS Code <b>453998</b>		4. Brief description of the character of business conducted in Rhode Island  <b>Retail sales of electronic cigarettes/products</b>	
5. State of Formation <b>Rhode Island</b>			
6. Principal Office Address <b>1483 Mineral Spring Ave</b>		City <b>North Providence</b>	State <b>RI</b>
Zip <b>02904</b>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>Dino Baccari</b>		Contact Title <b>Member</b>	
Street Address <b>1483 Mineral Spring Ave</b>		City <b>North Providence</b>	State <b>RI</b>
Zip <b>02904</b>			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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 <b>Dino Baccari</b>		Date <b>7/31/2023</b>	
Signature of Authorized Person 			

FILED

AUG 01 2023

BY ML BGWKM

MAIL TO:

Division of Business Services

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