



**State of Rhode Island  
Office of the Secretary of State**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Certificate Request Form**

**Request Information**

ID	ENTITY NAME	CERTIFICATE TYPE
000064127	NEWPORT PLAYHOUSE and CABARET RESTAURANT INC.	Certificate of Good Standing

**Filer's Contact Information**

*(Enter a contact name, mailing address and email.)*

Contact Name: Joanthan Perry

Business Name: Newport Playhouse & Cabaret Restaurant Inc.

No. and Street: PO Box 451

City or Town: Newport

State: RI Zip: 02840 Country: USA

Contact Phone: 401-862-0625 ext:

Contact Email: audrey@newportplayhouse.com