



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Corporation _____

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

2023 OCT 23 P 2:41

1. Entity ID Number 000041664	2. Exact name of the Corporation TAV-VINO, INC.
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3. Principal Office Address 54 GIBSON ROAD	City Bristol	State RI	Zip 02809
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4. NAICS Code 722511	6. Brief description of the character of business conducted in Rhode Island RESTAURANT TITLE: 7-1.1-51
5. State of Incorporation RI	

7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name PAUL D BULLOCK			Vice-President Name PAUL D BULLOCK		
Street Address 54 GIBSON ROAD			Street Address 54 GIBSON ROAD		
City BRISTOL	State RI	Zip 02809	City BRISTOL	State RI	Zip 02809
Secretary Name PAUL D BULLOCK			Treasurer Name PAUL D BULLOCK		
Street Address 54 GIBSON ROAD			Street Address 54 GIBSON ROAD		
City BRISTOL	State RI	Zip 02809	City BRISTOL	State RI	Zip 02809

8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. Shares Authorized	10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	2000	STK	0.00

11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.
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 Representative PAUL BULLOCK	Date 10/23/2023
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Signature of Authorized Representative <i>Paul Bullock</i>	FILED <i>2/22</i>
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OCT 23 2023

BY 3065Q