	State of Rhode Island Fee: \$50.00 Office of the Secretary of State
	Division Of Business Services
	148 W. River Street
	Providence RI 02904-2615
1630	(401) 222-3040
Limited Liability Company Annual Report Filing Period: February 1 - May 1	
Filing Period: Feb	oruary 1 - May 1
refusing to file its	h R.I.G.L. 7-16-66(d), each limited liability company failing or annual report within thirty (30) days after the time prescribed by 5-66(b&c)) is subject to a penalty fee of \$25.00.
ANNUAL REPOR	RT YEAR - ENTER THE CURRENT YEAR <b>2024</b> : <u>2024</u>
1. ID No. <u>000</u>	0119018
2. Exact Name of	of the Limited Liability Company <u>ANTONIO'S PIZZA - THAYER STREET, LLC.</u>
3. State of Form	nation
State: <u>RI</u>	
NAICS CODE	
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.	
<u>722513</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island	
<u>PIZZA &amp; SANI</u>	OWICH SHOP
5. Principal Offic	ce Address
No. and Street:	7610 POST ROAD ,UNIT 2
	<u>P.O. BOX 1139</u>
City or Town:	<u>NORTH KINGSTOWN</u> State: <u>RI</u> Zip: <u>02852</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name:	Contact Title:
No. and Street:	PO BOX 1139
City or Town:	P.O. BOX 1139 NORTH KINGSTOWN State: RI Zip: 02852 Country: USA

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

COLLEEN C. BORGES 7610 POST ROAD, #4 P.O. BOX 1139 NORTH KINGSTOWN , RI 02852

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

**Signed this 9 Day of January, 2024 at 3:53:45 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 <u>KIM SALZILLO</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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