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Annual Report for the year: 2024 Limited Liability Company

FILED

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

Entity ID Number	2. Exact name of the Lim	2. Exact name of the Limited Liability Company		
001665148	KUPA ENTERP	KUPA ENTERPRISES, LLC		
3. NAICS Code 722513	4. Brief description of the RESTAURANT	Brief description of the character of business conducted in Rhode Island RESTAURANT		
5. State of Formation RHODE ISLAND				
6. Principal Office Addres:	S	City	State	Zip
1637 Stony Lane		North Kingstown	RI	02852
7. Mailing Address of Limi	ted Liability Company and Name	or Title of Contact Person	1	
Contact Name JOHN J. KUPA, III		Contact Title Member		
Street Address 1637 Stony Lane		City North Kingstown	State RI	^{Z₁p} 02852
8. The Resident Agent info	ormation currently of record with t	he RI Department of State is accurate	. Changes require	e filing Form 642.
	iry, I declare and affirm that I ho statements contained herein ai	ave examined this report, including re true and correct.	any accompany	ving schedules an
Name of Authorized Person			Date /	1
	1ember		1 1/-	1/2/8

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov