



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
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.

REC'D RIDOS BSD
24 APR 19 PM 3:52:03

| | | | |
|---|--|---|------------------------|
| 1. Entity ID Number <u>1755784</u> | | 2. Exact name of the Limited Liability Company <u>Ghost cafe & hookah lounge LLC</u> | |
| 3. NAICS Code <u>722515</u> | | 4. Brief description of the character of business conducted in Rhode Island <u>Cafe & hookah lounge.</u> | |
| 5. State of Formation <u>RI</u> | | | |
| 6. Principal Office Address <u>162 O'Connell Street</u> | | City <u>Providence</u> | State <u>RI</u> |
| | | Zip <u>02905</u> | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name <u>Gladis Solis</u> | | Contact Title <u>Geo</u> | |
| Street Address <u>162 O'Connell st</u> | | City <u>Providence</u> | State <u>RI</u> |
| | | Zip <u>02907</u> | |
| 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 <u>Gladis Solis</u> | | | Date <u>4-19-24</u> |
| Signature of Authorized Person | | | |

FILED

352

APR 19 2024
BY STTWY
ES

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov