

State of Rhode Island Department of State - Business Services Division

Annual Report for the year:
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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
1738086	House of Boba				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
122515	milhtea + waffles				
5. State of Formation					
4工	WEMAKEA				
6. Principal Office Address		City	State	Zip	
166 valley	81	Prov	RI	02909	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Centect Name Contect Title					
Rahia h.	ector	GUNER			
Steel Address 842 Man 400	87 trirso	Pawtue tet	State	0286	
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	Ralana Ha	octoc.	Date 5/16	124	
Signature of Authorized Person	18		7		

FILED 252

MAY 16 2024

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MAIL TO:

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