



**State of Rhode Island  
Department of State - Business Services Division**

**FILED**  
**MAY 28 2024**  
BY *[Signature]*

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.

1. Entity ID Number <b>001696162</b>		2. Exact name of the Limited Liability Company <b>CANTINA DEL RÍO OF SOUTH KINGSTOWN LLC</b>	
3. NAICS Code <b>722511</b>		4. Brief description of the character of business conducted in Rhode Island <b>MEXICAN RESTAURANT FULL SERVICE</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>515 KINGSTOWN RD</b>		City <b>WAKEFIELD</b>	State <b>RI</b>
		Zip <b>02879</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>JOSE ANTONIO SANTILLAN</b>		Contact Title <b>PRESIDENT</b>	
Street Address <b>52 WASHINGTON ST</b>		City <b>WAKEFIELD</b>	State <b>RI</b>
		Zip <b>02879</b>	
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 <b>JOSE ANTONIO SANTILLAN</b>		Date <b>5/24/2024</b>	
Signature of Authorized Person		<i>[Signature]</i>	

**MAIL TO:**  
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