

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2024

→ 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				
122948	Chraieb two LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
722511	Restaurant				
5. State of Formation					
2.8					
6. Principal Office Address		City	State	Zip	
647 main Ave		warnick	K.T.	02886	
7. Mailing Address of Limited Lia	bility Company and Name or Title	e of Contact Person			
Contact Name		Contact Title			
Ebraham Ghraieb		onner			
Street Address 825 Pontice Ave		Cranston	State 7	21p 0 7 9 0	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
	leclare and affirm that I have ex nents contained herein are true	·	g any accompanyl	ng schedules and	
Name of Authorized Person			Date		
Ebrahan Ghraieb			7/8/74		
Signature of Authorized Person					

RI DOS MADE EDITS PER FILER

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MAIL TO:

Division of Business Services

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