

State of Rhode Island Department of State - Business Services Division

25 FES 19 FY2:31:30

Annual Report for the year: Limited Liability Company

2023

→ 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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Entity ID Number	2. Exact name of the Limited Liability Company			
696617100	Mr. Pizza LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
722513	Take out only pizza and salado made from scratch.			
5. State of Formation	1 made from scientin			
RI				<u></u>
6. Principal Office Address		City	State	Zip
49 Beach St Unit 5		Westerly	RI	03891
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
David Allen Reeven		Owner		
Street Address		City	State	Zip 1552Cal
19 Beach St Unit 5		Lesterly	16.	100011
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			Date	
David Allen Reeves			2/13/25	
Signature of Authorized Person				
Verally				

MAIL TO:

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

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