



State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year: 2025
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 001689432		2. Exact name of the Limited Liability Company CLIFFSIDE INN, LLC		
3. NAICS Code 721110		4. Brief description of the character of business conducted in Rhode Island OPERATION AND MANAGEMENT OF A BOUTIQUE HOTEL AND INN		
5. State of Formation RHODE ISLAND				
6. Principal Office Address 2 SEAVIEW AVENUE		City NEWPORT	State RI	Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name CHARLES C HAJJAR		Contact Title MANAGER		
Street Address 30 ADAMS STREET		City MILTON	State MA	Zip 02186
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
9. <i>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.</i>				
Name of Authorized Person CHARLES C HAJJAR			Date 04/25/2025	
Signature of Authorized Person 				

FILED
MAY 09 2025 *02*
BY 12510

MAIL TO:

Division of Business Services

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