



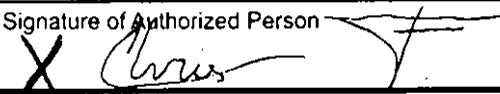
State of Rhode Island  
Department of State - Business Services Division

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.

**STAMP**

2025 MAY 12 PM 4:00  
RECEIVED  
RI DEPT OF STATE  
BUS SVCS DIV

1. Entity ID Number <b>001778818</b>		2. Exact name of the Limited Liability Company <b>FERNANDEZ GROUP SUPERMARKET, LLC</b>	
3. NAICS Code <b>445110</b>		4. Brief description of the character of business conducted in Rhode Island <b>GROCERY STORE</b>	
5. State of Formation <b>RHODE ISLAND</b>			
6. Principal Office Address <b>624 CRANSTON STREET</b>		City <b>PROVIDENCE</b>	State <b>RI</b>
		Zip <b>02907</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>CHRISTOPHER FERNANDEZ</b>		Contact Title <b>MANAGER</b>	
Street Address <b>840 N 38TH STREET</b>		City <b>ALLENTOWN</b>	State <b>PA</b>
		Zip <b>18104</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>CHRISTOPHER FERNANDEZ</b>		Date <b>02/06/2025</b>	
Signature of Authorized Person 			

**FILED**

**MAY 12 2025**

BY 61074

**MAIL TO:**

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)