

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.

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1. Entity ID Number	2. Exact name of the Limited Lia	2. Exact name of the Limited Liability Company				
001445497	A & M ENTERPRISES, RHODE ISLAND LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
722515	Snack and Nonalcoholic	Snack and Nonalcoholic Beverage Bars				
5. State of Formation						
RI						
6. Principal Office Address		City	State	Zip		
11 SOUTH ANGEL S	TREET UNIT 358	PROVIDENCE	RI	02906		
7. Mailing Address of Limited	Liability Company and Name or Title	of Contact Person	<u>, </u>	•		
Contact Name ADI AVRAHAM		Contact Title PRESIDENT				
Street Address 11 SOUTH	ANGEL STREET UNIT 358	PROVIDENCE	State RI	^{Zip} 02906		
8. The Resident Agent inform	nation currently of record with the RI D	epartment of State is accurate	. Changes require	e filing Form 642.		
	r, I declare and affirm that I have ext atements contained herein are true		any accompany	ring schedules and		
Name of Authorized Person			Date			
VINCENT LEVROS			04/29/2025			
Signature of Authorized Pers	son A	Arr,	•			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

