



State of Rhode Island
Department of State - Business Services Division

STAMP

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 001711650		2. Exact name of the Limited Liability Company KMKYF LLC	
3. NAICS Code 457100		4. Brief description of the character of business conducted in Rhode Island CONVENIENCE STORE W/SELF SERVE GASOLINE	
5. State of Formation RHODE ISLAND			
6. Principal Office Address 644 OAKLAWN AVENUE		City CRANSTON	State RI
Zip 02920			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name MOKHTAR KATTAN		Contact Title PARTNER	
Street Address 2416 CRANSTON		City RI	State RI
Zip 02920			
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 MOKHTAR KATTAN		Date 05/28/2025	
Signature of Authorized Person MOKHTAR KATTAN			

FILED

MAY 29 2025

BY

REAJB

MAIL TO:

Division of Business Services
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