

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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Entity ID Number	2. Exact name of the Limited Liability Company				
000506711	Acaiberri LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
311411	Fruit Juice				
5. State of Formation					
Rhode Island					
6. Principal Office Address		City	State	Zip	
50 King Street		Johnston	RI	02919	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Angelo Aiello		Contact Title President			
Strect Address 50 King Street		Johnston Johnston	State RI	^{Zip} 02919	
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 / /		
Angelo Aiello			6/6/25		
Signature of Authorized Person Augus Quello					

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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