



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year:  
Limited Liability Company

2022

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

REC'D  
25 JUL 28 PM 1:35:00  
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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------|-----------------------------|
| 1. Entity ID Number<br>000966074                                                                                                                                                                        |  | 2. Exact name of the Limited Liability Company<br>PREBOT DELIVERIES LLC                           |                             |
| 3. NAICS Code<br>311811                                                                                                                                                                                 |  | 4. Brief description of the character of business conducted in Rhode Island<br>BREAD DISTRIBUTION |                             |
| 5. State of Formation<br>RI                                                                                                                                                                             |  |                                                                                                   |                             |
| 6. Principal Office Address<br>56 OAK ST                                                                                                                                                                |  | City<br>PROVIDENCE                                                                                | State<br>RI<br>Zip<br>02909 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person                                                                                                                     |  |                                                                                                   |                             |
| Contact Name<br>EDDY PREBOT                                                                                                                                                                             |  | Contact Title<br>OWNER                                                                            |                             |
| Street Address<br>56 OAK ST                                                                                                                                                                             |  | City<br>PROVIDENCE                                                                                | State<br>RI<br>Zip<br>02909 |
| 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<br>EDDY PREBOT                                                                                                                                                                |  | Date<br>7/28/2025                                                                                 |                             |
| Signature of Authorized Person<br>                                                                                                                                                                      |  |                                                                                                   |                             |

FILED

JUL 28 2025

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MAIL TO:

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