



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 001708881		2. Exact name of the Limited Liability Company PAUL MONTE, LLC	
3. NAICS Code 722513		4. Brief description of the character of business conducted in Rhode Island FOOD TRUCK	
5. State of Formation RI			
6. Principal Office Address 20 JOHN MOWRY RD		City SMITHFIELD	State RI
		Zip 02917-1215	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name RAFAEL PEREZ		Contact Title MANAGING MEMBER	
Street Address 285 DOUGLAS PIKE		City SMITHFIELD	State RI
		Zip 02917	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
<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 RAFAEL PEREZ		Date 3/14/25	
Signature of Authorized Person 			

FILED

SEP 19 2025

BY 1025

MAIL TO:

Division of Business Services

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