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## 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 Liability Company				
700749a67	LA TABERNA BAR RESTAURANT LLC				
3. NAICS Code  72251  5. State of Formation  RI	4. Brief description of the character of business conducted in Rhode Island  BAC & RESPORANT				
6. Principal Office Address	<u> </u>	City	State	Zip	
695 LONSDALE AVE		CENTRAL FALLS	RI	02863	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Carlos Ramuer		Owner			
Street Address		City	State	Zιρ	
45 Havis	St	Pawtucket	RE	02860	
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		
CARLOS RAMIREZ			09-30-25		
Signature of Authorized Person					

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BY TWPEY

MAIL TO:

**Division of Business Services** 

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

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