

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

401.222.30

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(cer'al)) is subject to a penalty fee of \$25.00.

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1. Corporate ID No. 47691	2. Name of Corporation GUYS & GALS	on B HAIRSTYLING SAL	ON, INC.		
3 Street Address Principal Business Office 343 D Main Street			City Wakefield	State RI	Zip 02879
4. Business Phone No. 5. State of Incorporation 401-783-5175 Rhode Island				. 1	
6. Brief Description of the Character Ear piercing, facials, make-	of Business Conducted in up, waxing, manicu	<i>i Rhode Island</i> ures, hair cutting, styling	, braiding, tanning, etc.		
7. NAMES AND ADDRESSES President Name	OF THE OFFICER	S: ("X" BOX FOR ATTA	CHMENT) TILL IN SPACE	ES BEFORE USING	ATTACHMENTS
Jean C. Waggoner			None		
Street Adaress 1104 Mooresfield Road			Street Address		
City Wakefield	State RI	^{Zip} 02879	City	State	Zip
Secretary Name Jean C. Waggoner			Treasurer Name Jean C. Waggoner		
Street Address 1104 Mooresfield Road			Street Address 1104 Mooresfield Road		
City Wakefield	State RI	^{Zip} 02879	Gity Wakefield	State RI	^{Zφ} 02879
8. NAMES AND ADDRESSES Director Name Jean C. Waggoner	OF THE DIRECTO	RS: ("X" BOX FOR AT	TACHMENT) FILL IN SPA	CES BEFORE USIN	IG ATTACHMENTS
Street Address 1104 Mooresfield Road			Street Address		
^{City} Wakefield	State RI	<i>zip</i> 02879	City	State	Zip
Director Name			Director Name	******************************	
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 300			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value
			100	Common	No par value
This report must be executed this report must be executed of	on behalf of the corp	poration by an authorize poration by the receiver	or trustee.		
FILE File Date FEB 1 0	ED 2011		Under penalty of perjury including any accompar companied herein are true	ying schedules and sta	that I have examined this report atements, and that all statement $2-5-2011$
Check No. By	mc		<i>Stepature</i> Jean C. Waggor	ner	Date
By:			Print or Type Name President		
FOR SECRETARY OF STA	TE USE ONLY		Title		