

A. Ralph Mollis, Secretary of Stat Corporations Divisio 148 W. River Stret Providence, RI 02904-261

401.222.304 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 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(cedd)) is 1. Corporate ID No 2. Name of Corporation 3. Street Address Principal Business Office ZipState of Incorporation 5. Brief Description of the Character of Business Conducted in Rhode Island Styling and Beauty 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Michelle Puleo Boutin Stephen Puleo Jr. Street Add 394 Wickenden Street Street Address 394 Wickenden St. Providence, RI 02903 Providence, RI 02903 Gttv City Secretary Name Treasurer Name Michelle Puleo Boutin Street Address Stephen Puleo Jr. Street Addre. 394 Wickenden Street 394 Wickenden St. Providence, RI 02903 Providence, RI 02903 City Z.ip3. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Stephen Puleo Jr. Street Address Street Addre: 394 Wickenden St. Michelle Puleo Boutin 394 Wickenden Street Providence, RI 02903 City City Providence, RI 02903 Director Name Director Name Street Address Street Address Sitv City State Zip 9. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Class/Series This information is currently of record in the Office of the Secretary of Par Value State. Changes require an additional filing. See Section 9 of 200 COMMER instruction sheet.

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date	FILED	
Check No	FEB 1 1 2011	_
Ву: — (8739	_

Jnder penalty of perjury, I declare and aff neluding any accompanying schedules an	
contained herein are true and correct.	las de 2/10/201
ignature V	Date
Stephen Pulei	o JR
Print or Type Name	
President	
Title	
	Form 630 Rev 08/08