

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 2009

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(c3-d)) is subject to a penalty fee of \$25.00.

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1. Corporate ID No. 22101	2. Name of Corpore THE BEST L	nion ITTLE HAIRHOUSE, II	NC.	<u> </u>	
3. Street Address Principal Business Office 731 Hope Street			City Providence	State RI	Zη, 0290 6
4. Business Phone No. 5. State of Incorporation 401 751-0230 Rhode Island				02000	
6. Brief Description of the Charact Beautician Services	er of Business Conducted	l in Rhode Island			
7. NAMES AND ADDRESS	ES OF THE OFFICE	RS: ("X" BOX FOR ATT	(CHMENT) FILL IN	SPACES BEFORE USIN	G ATTACHMENTS
President Name Beverly Alessandro			Vice President Name		
Street Address			Beverly Alessandro Street Address		
33 Blackburn Street			33 Blackburn Street		
Pawtucket	State RI	^{Zip} 02861	City Pawtucket	State RI	<i>Zip</i> 02861
Secretary Name Beverly Alessandro			Treasurer Name Beverly Alessandro		
Street Address 33 Blackburn Street			Street Address 33 Blackburn Street		
City Pawtucket	State RI	<i>Ζψ</i> 02861	City Pawtucket	State RI	² / _p 02861
8. NAMES AND ADDRESSI Director Name	S OF THE DIRECT	ORS: ("X" BOX FOR AT	TACHMENT) [FILL II	N SPACES BEFORE USI	NG ATTACHMENTS
Beverly Alessandro			Director Name		
Street Address			Street Address		
33 Blackburn Street					2
City Pawtucket	State RI	^{Zip} 02861	City	State	
Director Name			Director Name	•••••••••••••••••••••••••••••••••••••••	MAR 200 TO 100 T
Street Address			Street Address		
City	State	Zip	City	State	Zip 35 S 0
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
			ISSUED SHAKES THIS SE	CTION <u>MUST</u> BE COMPLETE	5 m
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		no par value
This report must be executed this report must be executed	d on behalf of the co	orporation by an authorize	ed representative. If the c	ornoration is in the hand	de of a receiver or trustee
this report must be executed	on behalf of the co	rporation by the receiver	or trustee.	orporation to in the name	as of a receiver of trustee,
_		FILED			
		? ! != != !=			
Pile Book		MAR 2 4 2011	Under penalty of p including any acco contained herein at	impanying schedules and si	that I have examined this reportatements, and that all statement
File Date	BY	2hD	Signature	ly Literson	10 1-27-10
Check No.	$-\mathcal{J}$	2914101	Beverly Ales	/ sandro	Date
FOR SECRETARY OF STATE USE ONLY			Print or Type Name		
			President		
		لنـــ	Title		-