



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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 2012

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(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 129821		2. Name of Corporation AIDILE DAY SPA, INC.			
3. Street Address Principal Business Office 53 WATERMAN AVENUE			City EAST PROVIDENCE	State RI	Zip 02914
4. Business Phone No. 434-3665		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island BEAUTY SALON AND DAY SPA					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MARIA AIDILE FERRO			Vice President Name GEORGE E. FERRO		
Street Address 25 COFALL STREET			Street Address 25 COFALL STREET		
City SEEKONK	State MA	Zip 02771	City SEEKONK	State MA	Zip 02771
Secretary Name MARIA AIDILE FERRO			Treasurer Name GEORGE E. FERRO		
Street Address 25 COFALL STREET			Street Address 25 COFALL STREET		
City SEEKONK	State MA	Zip 02771	City SEEKONK	State MA	Zip 02771
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name MARIA AIDILE FERRO			Director Name GEORGE E. FERRO		
Street Address 25 COFALL STREET			Street Address 25 COFALL STREET		
City SEEKONK	State MA	Zip 02771	City SEEKONK	State MA	Zip 02771
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 200	Class/Series COMMON	Par Value NO PAR VALUE

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.

FILED

File Date JAN 20 2012

Check No. 1396 By Maria

By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Maria Aidile Ferro 1/12/2012

Signature _____ Date _____

MARIA AIDILE FERRO

Print or Type Name _____

PRESIDENT

Title _____