



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. 68739		2. Name of Corporation A.T.D., Inc.	
3. Street Address Principal Business Office 9 Nutmeg Drive		City Johnston	State RI
4. Business Phone No. 401-934-2145		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island Business of a salon for the cutting/styling of men, women & children; also treatment of hair, skin, nails & sale of products for hair, skin & nails.			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Alfred T. DiLibero, Jr.		Vice President Name Alfred T. DiLibero, Jr.	
Street Address 9 Nutmeg Drive		Street Address Same	
City Johnston	State RI	City	State
Zip 02919		Zip	
Secretary Name Alfred T. DiLibero, Jr.		Treasurer Name Lynn M. DiLibero	
Street Address Same		Street Address Same	
City	State	City	State
Zip		Zip	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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 100	Class/Series Common
		Par Value None	

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: FEB 09 2012

Check No. 9664

By: Alfred T. DiLibero, Jr.

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.

Alfred T. DiLibero, Jr. 11/31/12

Signature Date

Alfred T. DiLibero, Jr.

Print or Type Name

President

Title