



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

2012

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

| | | | |
|--|-------------|---|-------------|
| 1. Filing ID 101172 | | 2. Exact name of the limited liability company Seahorse Sensations LLC | |
| 3. State of Formation Rhode Island | | 4. Brief description of the character of business conducted in Rhode Island Hair Salon | |
| 5. Principal office address 14A Pier Market Place | | City Narragansett | State RI |
| | | Zip 02882 | |
| Contact Name Dennis Santos | | Contact Title Owner/Manager | |
| Street Address 14A Pier Market Place | | City Narragansett | State RI |
| | | Zip 02882 | |
| Manager Name Dennis Santos | | Manager Name | |
| Street Address 14A Pier Market Place | | Street Address | |
| City Narragansett | State RI | Zip 02882 | |
| Manager Name | | Manager Name | |
| Street Address | | Street Address | |
| City | State | Zip | |
| City | | State | Zip |

This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.

FILED 1232

FEB 07 2013

BY 12109498

10 FEB -7 00:12:32

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.

Dennis Santos

Signature of Authorized Person

Date

Dennis Santos

Print or Type Name of Authorized Person