



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

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Domestic Limited Liability Company  
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

**This form is only to be used to amend the current annual report on file with this office.**

**ANNUAL REPORT YEAR:** 2014

**1. ID No.** 000124785

**2. Exact Name of the Limited Liability Company** MRS MAY, LLC

**3. State of Formation**

State: RI

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

BEAUTY SUPPLY BUSINESS

**5. Principal Office Address**

No. and Street: 8015 INTERNATIONAL DRIVE  
SUITE 304

City or Town: ORLANDO State: FL Zip: 32819 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: MRS MAY Contact Title:

No. and Street: PO BOX 8188

City or Town: WARWICK State: RI Zip: 02888 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

LINDA J. MAINTANIS 48 ST. GEORGE COURT WARWICK , RI 02888

**Signed this 20 Day of November, 2014 at 3:26:45 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that**

*individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By LINDA MAINTANIS  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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