



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

Fee: \$50.00

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

**Business Corporation
Annual Report**

Filing Period: January 1 - March 1

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.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000100806

2. Name of Corporation Providence Place Salon, Inc.

3. Street Address Principal Business Office:

No. and Street: 159 CAMBRIDGE STREET

City or Town: ALLSTON

State: MA

Zip: 02134

Country: USA

4. Business Phone No.

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

TO CONDUCT A BEAUTY SALON TYPE BUSINESS FOR THE RENDERING OF SERVICES OF ANY AND ALL TYPES.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	LUIGI DEPALMA	159 CAMBRIDGE STREET ALLSTON, MA 02134 USA
SECRETARY	NINO MICOZZI	150 CAMBRIDGE STREET ALLSTON, MA 02134 USA
PRESIDENT	NINO MICOZZI	159 CAMBRIDGE STREET ALLSTON, MA 02134- USA
DIRECTOR	NINO MICOZZI	159 CAMBRIDGE STREET

		ALLSTON, MA 02134 USA
DIRECTOR	LUIGI DEPALMA	159 CAMBRIDGE STREET ALLSTON, MA 02134 USA
DIRECTOR	CESIDIO P. TIBERI	159 CAMBRIDGE STREET ALLSTON, MA 02134 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
STK		\$0.0000	8,000.00	500

9. 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.

Signed this 10 Day of February, 2016 at 10:52:31 AM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By NINO MICOZZI
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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