



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

Fee: \$20.00

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

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000547219

2. Name of Corporation National Eyebrow Threading Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 101 WHITTIER ROAD

City or Town: PAWTUCKET

State: RI Zip: 02861 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO EDUCATE THE PUBLIC ABOUT THIS ANCIENT COSMETIC TECHNIQUE AND ASSIST PRACTITIONERS OF EYEBROW THREADING IN ITS PROMOTION IN THE UNITED STATES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	REKHA SALWI	101 WHITTIER ROAD PAWTUCKET, RI 02861 USA
DIRECTOR	SUSAN MAKUCH	22 PINE STREET

		BERKLEY, MA 02779 USA
DIRECTOR	SUSAN E BOMBACK	114 DEXTER STREET CUMBERLAND, RI 02864 USA
DIRECTOR	SANJANA R SALWI	101 WHITTIER ROAD PAWTUCKET, RI 02761 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

REKHA SALWI 101 WHITTIER ROAD PAWTUCKET , RI 02861

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 14 Day of June, 2016 at 12:19:45 PM 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 § 7-6.*

By REKHA SALWI
Signature of Authorized Person

Form No. 631
Revised 09/07

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