

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2016

FOR

STAMP

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number	2. Exact name of	of the	Corporation	· · · · · ·					
1240192	J EYELASH INC								
3. Principal Office Address				City		Sta	ate	Zip	
84 BROADWAY				NEWPOR	EWPORT			02840	
4. Business Phone Number				5. State of Incorporation					
718-909-7578				RHODE ISLAND					
6. Brief description of the cha	racter of business	con	ducted in Rhod	le Island					
NAIL SALON								6	
7. List ALL officers (names an	d addresses)			/	C	heck the b	oox to ind	licate an attachment	
President Name LIU, YUAN XIANG				Vice-President Name					
Street Address 6 SUNDOWN LANE				Street Address					
City MIDDLETOWN	State RI		<sup>Zip</sup> 02824	City		Sta	ite	Zip	
Secretary Name				Treasurer Name					
Street Address				Street Address					
									City
8. List ALL directors (names a	l nd addresses)			1	С	heck the b	ox to indi	icate an attachment	
Director Name "None"				Director Name					
Street Address				Street Address					
City	State Z			City		Sta	ite	Zip	
9. Shares Authorized			10. Shares Is	nund.	ed Chack ti		he box to indicate an attachment		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES			S/SERIES	JOX LO IIIO	PAR VALUE	
			0		CNP		G	0	
11. This report must be execut or trustee, this report must be					•	ne corpora	tion is in	the hands of a receiver	
Under penalty of perjury, I d	eclare and affirm	n tha	t I have exam	ined this repo		у ассотр	anying s	chedules and	
statements, and that all statements contained herein are true and correct.  Name of Authorized Representative  Date									
LIU, YUAN XIANG		8/2/2016							
Signature of Authorized Repre									
Junxing (	N-		SIGN DOC	CUMENTE	IERE				

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov



FORM 630 - Revised: 05/2016