

Annual Report for the year: 2016 **Limited Liability Company**

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- --> Penalty: Additional \$25.00 fee if form is not filed by December 1.

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1. Entity ID Number	2. Exact name of the Limited Liability Company						
001656998	DENISE'S SALON, LLC DBA: JAZZI NAILS & HAIR SALON						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
812112	HAIL & NAIL SALON						
5. State of Formation							
RHODE ISLAND							
6. Principal Office Address			City	State	Zip		
80 GREENVILLE	E AVENUE		JOHNSTON	RI	02919		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name DENISE DIPIPPO			Contact Title MEMBER				
Street Address 117 DERBYSHIRE DRIVE			City CRANSTON	State R I	^{Zip} 02921		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name	· <u>-</u>		Manager Name				
Street Address		-	Street Address				
City	State	Zip	City	State	Zip		
	Check the box to indicate an attachment						
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.							
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.							
Name of Authorized Person Date							
DENISE DIPIPE	90		9-	12-16			
Signature of Authorized Person SIGN DOCLINENT HERE							
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MAIL TO:

Division of Business Services

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

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

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FORM 632 - Revised: 08/2016