

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:	2015
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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R.I. DEPT. OF	STATE
BUS SYRS	DIV

2016 NOV 10 PM 3: 42

Entity ID Number	2. Exact name of the Limited Liability Company					
000166777	DISNALDA ENTERPRISES, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
81 - Other Services (except Pu	HAIR SALON					
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
118 VALLEY ST			PROVIDENCE	RI	02909	
7. Mailing Address of Limited Lia	bility Company	and Name or Tit	e of Contact Person			
Contact Name ROSA I FLORES			Contact Title PRESIDENT			
Street Address 118 VALLEY ST	118 VALLEY ST		City PROVIDENCE	State RI	^{Zip} 02909	
8. List ALL managers (names an	d addresses) c	f the Limited Lial	oility Company, IF APPLICABL	LE - DO NOT LIST I	MEMBERS	
Manager Name RODA I FLORES		Manager Name				
Street Address 740 CHALKSTONE AVE		Street Address	Street Address			
City PREVIDENCE	State RI	Zip 02908	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
			<u> </u>	Check the box to i	ndicate an attachment	
9. Resident Agent in Rhode Islan	d. This information	on is currently of re	cord with the Department of State	e. Changes require filir	ng Form 642.	
Under penalty of perjury, I decistatements, and that all statem	lare and affirm ents containe	that I have exa d herein are true	mined this report, including e and correct.	any accompanyin	g schedules and	
Name of Authorized Persopy			Date	Date		
ROSA I FLORES JOSEP SALE JAN JANAGE			11/10/2016			
Signature of Authorized Person		SIGN DC	CUMENT HERE			

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 3:43 pm

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