



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

Foreign 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: 2017

1. Corporate ID No. 000113526

2. Name of Corporation Aveda Experience Centers Inc.

3. Street Address Principal Business Office:

No. and Street: 7 CORPORATE CENTER DRIVE
ATTN: TAX DEPT.

City or Town: MELVILLE

State: NY Zip: 11747 Country: USA

4. Business Phone No.

6318476326

5. State of Incorporation

State: DE

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

44-45

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

TO PRODUCE, DISTRIBUTE, PURCHASE, MARKET AND SELL COSMETICS AND HAIRCARE PRODUCTS OF ANY KIND AND ANY PRODUCTS AND SERVICES RELATED THERETO.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

PRESIDENT	DOMINIQUE NILS CONSEIL	7 CORPORATE CENTER DRIVE MELVILLE, NY 11747- USA
ASSISTANT SECRETARY	JAMES SCHWECHERL	7 CORPORATE CENTER DR MELVILLE, NY 11747 USA
CFO/DIRECTOR	TRACEY T TRAVIS	7 CORPORATE CENTER DRIVE MELVILLE, NY 11747 USA
DIRECTOR	SARA E MOSS	7 CORPORATE CENTER DRIVE MELVILLE , NY 11747 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>
CWP		\$0.0100	1,000.00	100

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 17 Day of February, 2017 at 12:38:43 PM. *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 JAMES SCHWECHERL
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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