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

No Fee

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

<b>Busines</b>	ss Corporation
Annual	Report - Amended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2017

1. Corporate ID No. <u>001662208</u>

- 2. Name of Corporation PARK PLACE NAIL & SPA CORP
- 3. Street Address Principal Business Office:

No. and Street: 1101 PARK AVE

City or Town: CRANSTON State: RI Zip: 02910 Country: USA

4. Business Phone No.

401-270-7350

5. State of Incorporation

State: RI

## ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of business in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification click here.

NAICS Code



81

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

### NAIL CARE SERVICES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	YOUNG JA LEE	1101 PARK AVE CRANSTON, RI 02910 USA

TREASURER	YOUNG JA LEE	1101 PARK AVE CRANSTON, RI 02910 USA
SECRETARY	YOUNG JA LEE	1101 PARK AVE CRANSTON, RI 02910 USA
DIRECTOR	YOUNG JA LEE	1101 PARK AVE CRANSTON, RI 02910 USA

#### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
CNP		\$0.0000	200.00	0

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 31 Day of July, 2017 at 3:49:01 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 YOUNG JA LEE

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

July 31, 2017 03:48 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

