



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

Annual Report for the year: 2017
Limited Liability Company

- Filing period: Sept
- Filing Fee: \$50.00
- Penalty: Additional

List the entity's ID number. The ID number can be found by looking up your entity in the Corporate Database.

List the name of the LLC. The entity name can be verified through the Corporate Database.

1. Entity ID Number <input checked="" type="checkbox"/>		2. Exact name of the Limited Liability Company <input checked="" type="checkbox"/>	
910611		Blue Pearl Salon LLC	
3. NAICS Code <input checked="" type="checkbox"/>		4. Business conducted in Rhode Island <input checked="" type="checkbox"/>	
812112		Hair Salon	
5. State of Formation <input checked="" type="checkbox"/>		6. Principal Office Address <input checked="" type="checkbox"/>	
RI		1458 Park Ave #8 Cranston RI 02920	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person <input checked="" type="checkbox"/>		8. List ALL managers (names and addresses) of the Limited Liability Company <input checked="" type="checkbox"/>	
Contact Name: Tiffany DeRina		Contact Title: Owner	
Street Address: 111 Beckwith St		City: Cranston State: RI Zip: 02910	
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. <input checked="" type="checkbox"/>		An authorized person MUST sign and date the annual report.	
Under penalty of perjury, I declare and affirm that I have examined this report, its statements, and that all statements contained herein are true and correct. <input checked="" type="checkbox"/>		Name of Authorized Person: Tiffany DeRina	
Signature of Authorized Person:		SIGN DOCUMENT 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

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 SEP 21 2017
 BY WBA DS