

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year:	2017
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.

STAMP	
CANONIO CONTROLLO	
11/1/2	_

1, Entity ID Number	2. Exact name of the Limited Liability Company						
505896	Y & J BEAUTY SUPPLIES, LLC						
3. NAICS Code 446120	4. Brief description of the character of business conducted in Rhode Island						
44-45 - Retail Trade	BEAUTY SUPPLIES						
5. State of Formation	1						
RHODE ISLAND							
6. Principal Office Address			City	State	Zip		
1366 BROAD STREET			PROVIDENCE	RI	02905		
7. Mailing Address of Limited Lia	ibility Company and	d Name or Titl					
Contact Name JUAN MATEO			Contact Title MANAGER				
Street Address 29 WILDWOOD AVENUE			City PROVIDENCE	State RI	<sup>Z<sub>IP</sub></sup> 02905		
8. List ALL managers (names ar	nd addresses) of th	e Limited Liat	oility Company, IF APPLICABL	E - DO NOT LIST	MEMBERS		
Manager Name JUAN MATEO		Manager Name					
Street Address 29 WILDWOOD AVENUE			Street Andress				
City PROVIDENCE	State RI	<sup>Zip</sup> 02907	City	State	Zıp		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zıp		
. <del>- v</del>	L L	<del> </del>	<u> </u>	Check the box to	indicate an attachment		
9. Resident Agent in Rhode Islar	nd. This information is	s currently of re	cord with the Department of State	e. Changes require filir	ng Form 542.		
Under penalty of perjury, I dec statements, and that all staten				any accompanyin	g schedules and		
Name of Authorized Person				Date	Date		
JUAN MATEO			09/26/2	09/26/2017			
Signatury of Authorized Person	Males	SIGN DC	OCUMENT HERE				

**Division of Business Services** 

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