



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

FILED

STAMP

AUG 17 2018

BY

[Handwritten signature]

Annual Report for the year: 2018
 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.

1. Entity ID Number 000485341		2. Exact name of the Limited Liability Company GEL ESSENTIALZ, LLC					
3. NAICS Code 812113		4. Brief description of the character of business conducted in Rhode Island TO OWN AND OPERATE A NAIL SALON					
5. State of Formation RI							
6. Principal Office Address 2207 CRANSTON ST				City CRANSTON		State RI	Zip 02920
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name GINA RINALDI SILVESTRO				Contact Title PRESIDENT			
Street Address 2207 CRANSTON ST				City CRANSTON		State RI	Zip 02920
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name				Manager Name			
Street Address				Street Address			
City		State	Zip	City		State	Zip
Manager Name				Manager Name			
Street Address				Street Address			
City		State	Zip	City		State	Zip
Check the box to indicate an attachment <input type="checkbox"/>							
9 Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.							
<i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>							
Name of Authorized Person GINA RIANLDI SILVESTRO <i>[Signature]</i>						Date 8-14-2018	
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