

STAMP

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

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1 Entity ID Number	2. Exact name of the Limited Liability Company								
000155 <u>3</u> 77	The G. Spot Salon/Cafe LLC								
3. NAICS Code	Brief description of the character of business conducted in Rhode Island								
812112	Hair dressing salon								
5 State of Formation	1								
Rhode Island									
6. Principal Office Address	<u> </u>		City	State	Zip				
200 Post Road, Unit 523			Warwick	RI	02888				
7 Mailing Address of Limited Lia	bility Compan	y and Name or Title	of Contact Person						
Contact Name Moshe Gabai			Contact Title Member						
Street Address 99 Walton Street			City Providence	State RI	^{Zip} 02908				
8 List ALL managers (names ai	nd addresses)	of the Limited Liab	ility Company, IF APPLICAE	BLE - DO NOT LIST I	MEMBERS				
Manager Name Gina Gonsglus Gaha			Manager Name						
Street Address 200 Post Rd Unit 523			Street Address						
City Warwich	State	Zip	City	State	Zıp				
Manager Name			Manager Name						
Street Address			Street Address						
City	State	Zip	City	State	Zıp				
	1			Check the box to	ndicate an attachment				
9. Resident Agent in Rhode Islan	nd. This informa	ation is currently of rec	ord with the Department of Sta	ite. Changes require filir	ng Form 642.				
Under penalty of perjury, I ded statements, and that all staten			· · · · · · · · · · · · · · · · · · ·	g any accompanyin	g schedules and				
Name of Authorized Person	•			Date ()	10/12				
Moshe Gabai		1 /) <u>.</u>	8/	pr/18				
Signature of Authorized Person		WGN C/S	OCOMENT 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 FILED AUG 2 8 2018 02

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