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

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 **1666766**	2. Exact name of the Limited Liability Company **SG BEAUTY, LLC**
3. NAICS Code 446199	4. Brief description of the character of business conducted in Rhode Island **Beauty Consultant Focused on creating new brands in to market place, hair care, body care and skin care.**
5. State of Formation **Rhode Island**	

6. Principal Office Address **161 Seascape Avenue**	City **Middletown**	State **RI**	Zip **02842**

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name **Sandra Allison Green**	Contact Title **Manager**		
Street Address **161 Seascape Avenue**	City **Middletown**	State **RI**	Zip **02842**

8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS

Manager Name **Sandra Allison Green**			Manager Name		
Street Address **161 Seascape Avenue**			Street Address		
City **Middletown**	State **RI**	Zip **02842**	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

Check the box to indicate an attachment ☐

9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.

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.

Name of Authorized Person SANDRA Green	Date 10-23-18
Signature of Authorized Person Sandra Green SIGN DOCUMENT HERE	

FILED

NOV 05 2018

BY____

FORM 632 - Revised: 10/2017