



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

Annual Report for the year: 2019
Corporation

FILED

MAY 13 2019

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

BY 2836-2834

1. Entity ID Number 529151		2. Exact name of the Corporation ENCORE HAIR SALON, INC.			
3. Principal Office Address 23 Greenbrier Road		City Greenville		State RI	Zip 02828
4. NAICS Code 812112		6. Brief description of the character of business conducted in Rhode Island Hair Salon			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Kenneth Tortolani			Vice-President Name Kenneth Tortolani		
Street Address 23 Greenbrier Road			Street Address 23 Greenbrier Road		
City Greenville		State RI	Zip 02828	City Greenville	
State RI		Zip 02828		State RI	
Zip 02828		City Greenville		State RI	
City Greenville		State RI		Zip 02828	
Secretary Name Kenneth Tortolani			Treasurer Name Kenneth Tortolani		
Street Address 23 Greenbrier Road			Street Address 23 Greenbrier Road		
City Greenville		State RI	Zip 02828	City Greenville	
State RI		Zip 02828		State RI	
Zip 02828		City Greenville		State RI	
City Greenville		State RI		Zip 02828	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Kenneth Tortolani			Director Name		
Street Address 23 Greenbrier Road			Street Address		
City Greenville		State RI	Zip 02828	City	
State RI		Zip 02828		State	
Zip 02828		City		State	
City		State		Zip	
Director Name			Director Name		
Street Address			Street Address		
City		State	Zip	City	
State		Zip		State	
Zip		City		State	
City		State		Zip	
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>					
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	Common	.01
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
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 Representative Kenneth Tortolani, President					Date 5-6-19
Signature of Authorized Representative 					