



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

Annual Report for the year: 2019
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.

FILED
OCT 17 2019
STAMP
 6005 *[Signature]*

1. Entity ID Number 152191		2. Exact name of the Limited Liability Company CHINLAN, LLC			
3. NAICS Code 812111		4. Brief description of the character of business conducted in Rhode Island CONDUCTING BARBERSHOP, BARBER SCHOOL, AND SUCH OTHER ASSOCIATED BUSINESS			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 957 WEST MAIN ROAD			City MIDDLETOWN	State RI	Zip 02842
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name CHIN L. WHITE			Contact Title MANAGER		
Street Address 23 ROCKWOOD RD			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 CHIN L. WHITE			Manager Name		
Street Address 23 ROCKWOOD RD			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 CHIN L. WHITE				Date 10-8-2019	
Signature of Authorized Person <i>Chin L. White</i>				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
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 Website: www.sos.ri.gov