| State of  | of Rhode Island and Pro<br>Office of the Secreta |  | Fee: \$50.00     |  |  |  |
|---|--|--|------------------|--|--|--|
|   | Division Of Business                             |  |                  |  |  |  |
|   | 148 W. River S<br>Providence RI 0290             |  |                  |  |  |  |
| HOPE  | (401) 222-304                                    |  |                  |  |  |  |
| Foreign Business Corpora  | . ,  |  |                  |  |  |  |
| Annual Report   |  |  |                  |  |  |  |
| Filing Period: January 1 - March 1  |  |  |                  |  |  |  |
| In accordance with R.I.G.L. 7-1.2-  |  |  |                  |  |  |  |
| annual report within thirty (30) day (c&d)) is subject to a penalty fee of  |  | aw (R.I.G.L. 7-1.2-1501                    |                  |  |  |  |
|   |  |  |                  |  |  |  |
| ANNUAL REPORT YEAR: 2020  |  |  |                  |  |  |  |
| 1. Corporate ID No. 001668613   |  |  |                  |  |  |  |
| 2. Name of Corporation <u>GREAT CLIPS, INC.</u>                             |  |  |                  |  |  |  |
| 3. Street Address Principal Bus   | siness Office:                                   |  |                  |  |  |  |
| No. and Street: 4400 W 783  | TH ST., STE 700                                  |  |                  |  |  |  |
| City or Town: MINNEAP   |  | e: <u>MN</u> Zip: <u>55435</u> Cou         | ntry: <u>USA</u> |  |  |  |
| 4. Business Phone No.   |  |  |                  |  |  |  |
| <u>9527466428</u>   |  |  |                  |  |  |  |
| 5. State of Incorporation   |  |  |                  |  |  |  |
| State: <u>MN</u>  |  |  |                  |  |  |  |
|   | ARTICLE III                                      |  |                  |  |  |  |
| Enter the six digit NAICS Code th the list of codes here. More inforr       |  |  | ty. Download     |  |  |  |
| <u>541990</u>   |  |  |                  |  |  |  |
| 6. Brief Description of the Character of Business Conducted in Rhode Island |  |  |                  |  |  |  |
|   |  |  |                  |  |  |  |
| FRANCHISOR OF HAIR CARE SALONS  |  |  |                  |  |  |  |
| 7. Names and Addresses of the Officers and Directors:                       |  |  |                  |  |  |  |
| All officers and directors must be listed.                                  |  |  |                  |  |  |  |
|   |  |  |                  |  |  |  |
| Title   | Individual Name                                  | Address                                    |                  |  |  |  |
| PRESIDENT   | First, Middle, Last, Suffix<br>ROB GOGGINS       | Address, City or Town, State, Zip (        |                  |  |  |  |
|   |  | 4400 W 78TH ST ST<br>MINNEAPOLIS, MN 55435 |                  |  |  |  |
| TREASURER   | RACHELLE JOHNSON                                 | 4400 W 78TH ST., S                         | TE 700           |  |  |  |

|                              | MINNEAPOLIS, MN 55435 USA |                     |  |  |  |  |
|------------------------------|---------------------------|---------------------|--|--|--|--|
| Shares Authorized and Issued |                           |                     |  |  |  |  |
| Class of Stock               | Series of Stock           | Par Value Per Share | Total Authorized<br>Shares<br>Number of Shares | Total Issue<br>and<br>Outstandin<br><i>Num of</i><br><i>Shares</i> |  |  |
| CWP                          |                           | \$0.0010            | 5,000,000.00                                   | 5000000  |  |  |
| CWP                          |                           | \$0.0010            | 5,000,000.00                                   | 5000000  |  |  |

9. 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.

**Signed this 23 Day of March, 2020 at 11:57:14 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.* 

## By RACHELLE JOHNSON

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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