

# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State

Matthew A. Brown, Secretary of State Corporations Division 148 W. River St., Providence, RI 02904-2615 401.222.3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005 Filing Period: January 1 - March 1 Filing Fee: \$50.00

	To maint by confr	O' WITO!	within thirty (30) days after the time prescri	bed by law (R.I.G.1, 7-1.2-1501(c&d))	it subject to a penalty fee of \$75.00.
65059	Shear Geni	us Hair Stylists, Inc.			
3. Street Address Principal			City	State	Zip
708 PARK AVENU	ປ		CRANSTON	RI	02910
4. Business Phone No.		5. State of Incorpor		<del></del>	SIC Code
		RHODE ISLA	ND		8318
6. Brief Description of the C	haracter of Business Co	nducted in Rhode Island			1 0370
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7. NAMES AND ADDR	ESSES OF THE OF	FICERS C'X" BOX FOR	ATTACHMENT)   FILL IN S	PACES BREORE USING A	ITACQNICATO
			Vice President Name		TACHING TO
Ennio Mangi Street Address	occa		•		
-		•	Street Address		<u> </u>
708 Park Av			•		<u>,</u> 3
City Constant	State	Zip	City	State	Zip
Cranston Secretary Name	Rhode Isl	and] 02910	• • • • • • • • • • • • •		
Decretory Name			<i>Treasurer Name</i> Ennio Mangio		· · · · · · · · · · · · · · · · · · ·
Street 4.4.4.					
Street Address			Street Address		<u>::: ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;</u>
City			: 708 Park Ave	nue	<b>15</b>
Cuit	State	Zip	City	State	nd 5 02970
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Director Name	roses of the dir	ECTORS ("X" BOX FO	RATTACHMENT)   FILL IN	SPACES BEFORE USING	ATTACHMENTS
Ennio Mangio			, Director Name		
Sircei Address		· · · · · · · · · · · · · · · · · · ·			
708 Park Ave	5110		- Street Address		
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Ciry	State	Zip	City	State	Zip
Cranston Director Name	Rhode Isl	and 02910	· • • • • • • • • • • • • • • • • • • •		
Director Name			* Director Name		• • • • • • • • • • • • • • • • • • • •
Sireci Address	·				
SHEEL MAGNESS			Street Address	•	
City	State	Zip	·City		
•	J. T.	Z.ip	·Cny	State	Zıp
9. SHARES AUTHORIZ	ZED WYT DOY COD				
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1,000 NO PAR VALU	E		100	Common	No Par Valu
<del></del>		<del></del>			
(Na samus — ma ha			<u></u>	<u> </u>	
nit report must be executed on behalf	of the corporation by an authori:	ed representative. If the corporation	n is in the hands of a receiver ar trustee, this	report must be executed on behalf of th	he corporation by the receiver or trusts
IR RIIDI DUU O	( <b>3</b> 10)				
	<b>                                    </b>				
6 5 0	) 5 9		Under negative of neg	river I dealers and office of	
			this report including	rjury, I declare and affirm this any accompanying schedu	nat I have examined
*65059 DBC 02000	M:44 DM:		and that all statemen	its contained herein/are true	nes and statements,
	<b>ED</b> 4:41 PM',	1 10 22 7		_ / /	and correct.
File Date	<u> </u>	1:1 1:1 12	ملذد	Oller.	2-8-06
Charles JUN 2	7 2006		Signature of Officer	1 D	ate
Check No.	N 1/2	<u>- n -  </u>	1	(/A	Mitildian
. <b>Bv</b> (M	YK102361	".   ·	Print or Type Name of	Officer	· winguit
by:		-		ت. ۱۰ ۱۳	<u> </u>
FOR SECRETARY OF STAT	TE USE ONLY		Title of Officer	THE SI CON	<u> </u>
<del>-</del>			rine of Officer	· ·	Form 630 12/0



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Manhew A. Brown, Secretary of State Corporations Division 148 W. River St., Providence, RI 02904-2615 401.222.3040

Form 630 12/05

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

* In accordance with R.I.G.L. 7-1.2-150.  1. Corporate ID No.	(e), each corporation failing a	t refusing to file its annual teport a	rithin thirty (30) days after the time prescribed by it	rn (R.I.G.L, 7-1.2-150Hc&d) is subtr	tt to a penaln: foo of \$78 no
65059		ration Is Hair Stylists, Inc.			persons jet of \$23.00.
3. Street Address Principal Bu.	siness Office	S riali Stylists, Inc.	To:		
708 PARK AVENUE	эт одусс		City CRANSTON	State	Zip
4. Business Phone No.	<del></del>	5. State of Incorpora		RI	02910
		RHODE ISLA			SIC Code
6. Brief Description of the Char STYLING OF HAIR AN	racter of Business Cond D RETAIL SALES	hicted in Rhode Island OF PRODUCTS CONN	ECTED THERETO		8318
			ATTACHMENT)   FILL IN SPACE	S BEFORE USING ATTAC	HMENTS
Ennio Mangioc			Vice President Name		
Street Address			Street Address	<del></del>	· · · · · · · · · · · · · · · · · · ·
708 Park Aven	ue				
City	State	Zip	City	State	12:0
Cranston	Rhode Isl	and 02910	•	State	Zip
Secretary Name			<i>Treasurer Name</i> Ennio Mangiocca	- <b>'</b>	7.20% SS C
Street Address			* Street Address		
City		·	: 708 Park Avenue		
	State	Zip	<i>City</i> Cranston	State Rhode Island	2t <sub>p</sub>
8: NAMES'AND ADDRES  Director Name	SES OF THE DIRE	CTORS ("X" HOX FOR	ATTACHMENT)   FILL IN SPACE	ES BEFORE USINGATIA	CTMENTS
			Director Name		
Ennio Mangioce	d ·		·		
708 Park Avenu	e		· Street Address		
Ciry	State	Zip	· City	State	19:-
Cranston	Rhode Islan			Sidire	Zip
Director Name	• • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	Director Name		1
Street Address	<del></del>		*Street Address		
City			• •		
Juy.	State	Zip	·City	State	Zip
<b>ESHARESAUTHORIZE</b>	De Carr Por For	TACULAR CO	2 1		
AUTHORIZED SHARES	SUA BUALURAT	INCHMENT) [	ISSUED SHARES ISSUED CXTEOX	FORWITACHMEND)	30.16%。15
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			100		<del>                                     </del>
		<del></del> -	100	Common	No Par Valu
ils report must be executed on behalf of th	e corporation he un authorites	representative. If the corporation t	s in the hands of a receiver or trustee, this report a	ust he executed on behalf of the corns	rution by the receiver or tensor.
			•		and the section of the section
(8 EHR) BIH ABIA	l Blila (6)				
6 5 0	5 9		Under penalty of perjury, i	declare and affirm that I I	nave examined
		_	this report, including any a	eccompanying schedules a	nd statements,
*65059 DBCC 108008	:23:47 PM*	77 Pil 1:40	and that all state are are	tained herein are true and	correct.
File Date		1 110 20	, <del></del>	in believe	2-8-00
Check No. JUN 272	006	EY 1	Signature of Officer	Date	NG OCCA
By (NO)	R 102381	$A_{ij} = A_{ij} = A_{ij}$	Print or Type Name of Officer	ENNO HA	NG OCCA
OR SECRETARY OF STATE	LICE ONLY		$\Rightarrow_{n_0}$	2, 40.7	
FOR SECRETARY OF STATE	USI: UNLY				

65059

3. Street Address Principal Business Office

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1339

Zip

State

PROFIT CO	RPORATION	ANNUAL	REPORT	FOR	THE	YEAR _	2003
Filing Period: Janu	iary 1-March 1 •	Filing Fee: \$50	.00			• •	
FORM MUST BE TYPED OR	PRINTED IN BLACK						•
1. Corporate ID No.	2. Name of Corporat	ion					

City

Shear Genius Hair Stylists, Inc.

	S PARK AVE		5. State of to	ncorporation	CRANSTON	RI	02910 6. SIC Gode
7 Relef D	escription of the Character o	( Rusiness Conducted in Pho		E ISLAND			8318
STY	LING OF HAIR/R	ETAIL SALES OF	ASSOCI		DUCTS AND ANY OTHER ENT? FILL IN SPACES BEF	LEGAL PURPOSE ORE USING ATTACHM	ENTS
EN Sirect Add		SG10CCA			Street Address		
	708 PARK AVE						
Clty	CRANSTON	State RI	Zip	02910	City	State	Zip
Secretary	Name		•		Treasurer Name ENNIO MANGIOCCA	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	• ••• • • • • • • • • • • • • • • • • •
Street Add	dress				Street Address 708 PARK AVE		
City		State	ZIp		CRANSTON	State RI	02910
9. NAN	MES AND ADDRESSE	ES OF THE DIRECTO	ORS (*X* BC	OX FOR ATTACI	IMENT) FILL IN SPACES BI	EFORE USING ATTACH	MENTS
Street Add	ENNIO MANGIOCO	CA			Street Address		
City	708 PARK AVE	State	Zip		City	State	Zip
	CRANSTON	RI	,	02910	,		
Director 8	tome			•	Director Name	•	•
Street Ada	tress				Street Address		
City		State	ZIp	•	City	State	Zip
	ARES AUTHORIZED	CX* BOX FOR ATTACHM	(ENT)		11. SHARES ISSUED (*x* B) ISSUED SHARES	OX FOR ATTACHMENT)	
Number o	f Shares	Class/Series	Par Value		Number of Shares	Class/Serles	Par Value
1,000	NO PAR VALUE				100	COMMON	NO PAR

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FOR SECRETARY OF STATE USE ONLY

**€** 

this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Under penalty of perjury, I declare and affirm that I have examined

Title of Officer Form 630 12/02

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR <u>2002</u>

STOP PTE IN RE ID INSTRICTIONS

Filing Period: January	1-March 1 • Fi	iling Fee: \$50.00			PLEASE REAL INSERLECTION
(FORM MUST BE TYPED IN BLA	ck)				
1. Corporate ID No.	2. Name of Corporation				
65059	Shear Genius I	Hair Stylists, Inc.			
3. Street Address Principal Business	Office		City	State	ZIp
708 Park Avenue 4. Business Phone No.		5. State of Incorporation RHODE ISLAND	Cranston	Rhode Island	02910 6. SIG Code <b>8318</b>
7. Brief Description of the Character	of Business Conducted in Rh	onde Island Anv le	gal purpose includir	ng styling of ha	ir and
retail sales of pi 8. NAMES AND ADDRESS President Name		ted thereto	• • •	FORE USING ATTACHM	
Ennio Mangiocca Street Address			Street Address		
708 Park Avenue					
City	State	Zip	City	State	Zip
Cranston Secretary Name	Rhode Island	d 02910	Treusurer Name Ennio Mangiocca		
Street Address			Street Address 708 Park Avenue		
City	State	Zip	City	State	Ζίρ
			Cranston	Rhode Island	02910
9. NAMES AND ADDRESS Director Name	SES OF THE DIRECT	ORS (*X* BOX FOR ATT)	ACHMENT) FILL IN SPACES H Director Name	EFORE USING ATTACH	IMENTS
Ennio Mangiocca Succe Address			Street Address		
708 Park Avenue	State	Zip	Clty	State	Zip
Cranston Director Name	Rhode Island	d 02910	Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZEE AUTHORIZED SHARES	) (*X* BOX FOR ATTACH.	MENT)	. 11. SHARES ISSUED (*x* ) **ISSUED SHARES	BOX FOR ATTACHMENT)	
Number of Shates	Class/Series	Par Value	1 Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			1 1 100	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

-	* 6 5 0 5 9 *
File Dute:	4/02
Theck No.:	964
By:	TE USE ONLY

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.

Signature of Officer State

Ennio Mangiocca
Print or Type Name of Officer

President

Title of Officer

Form 630 12/01

File Date: \_\_\_

Check No.: \_

FOR SECRETARY OF STATE USE ONLY

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

STOP

rung	rerioa:	january	I-March I	•	Filing Fee: \$50.00	
/··						

(FORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No. 65059	2. Name of Corporation Shear Genius	. Hair Stylists	, Inc.		
3. Street Address Principal Business	ОПес		City	State	Zip
708 Park Avenue 4. Business Phone No.		5. State of Incorporation RHODE ISLAND	Cranston	Rhode Island	02910 <sup>ଶ୍</sup> ଷ୍ଟ <b>୍ରେମ୍ଫ</b>
7. Brief Description of the Character	of Business Conducted in Rho	de Island Any 1e	gal purpose includi	ing etuling of	
hair and retail so 8. NAMES AND ADDRESS President Name	ales of product	s connected the	reto	PORE USING ATTACHM	IENTS
Ennio Mangiocca Street Address			* Street Address		
708 Park Avenue				_	
Cranston	Rhode Island	21p 02910	City	State	Zip
Secretary Name	Knode Island	02310	Treasurer Name	•	
Street Address			Ennio Mangiocca Street Address		
			708 Park Avenue		
Glly	State	Zip	City	State	Z.Ip
9. NAMES AND ADDRESS Director Name Ennio Mangiocca Street Address	SES OF THE DIRECTO	ORS (*X* BOX FOR ATTAC	Cranston CHMENT) FILL IN SPACES B Director Name Street Address	Rhode Island_ EFORE USING ATTACH	02910 HMENTS
708 Park Avenue					
City	State	Zip	. City	State	Zip
Cranston Director Name	Rhode Island	, 02910 ,	Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	) ("X" BOX FOR ATTACHM	GENT) (	11. SHARES ISSUED (*x* ) ISSUED SHARES	BOX FOR ATTACHMENT!	
Number of Shares	Glass/Series	Por Value	Number of Shares	Class/Series	Par Value
1000 SHARES NO P	AR VAL		100	Common	No Par Value
This report must be signe	ed in ink by either t	he President, Vice Pr	resident, Secretary, Assista	nt Secretary, Treasure	r, Receiver or Trusto
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* 6	5 0 5 9 <b>*</b>			y, I declare and affirm th	
	(		this report, including an	ny accompanying schedu	ies and statements, an

Ennio Mangiocca

Print or Type Name of Officer

President

Title of Officer

Form 630 12/00

that all statements-cogtained herein are true and correct.

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

	PORATION ANNUAL REPORT FOR THE YI	EAR 2000
FORM MUST BE TYPED IN B	•	
. Corporate ID No. <b>65059</b>	2. Name of Corporation Shear Genius Hair Stylists, Inc.	

STOP PHASE READ INSTRUCTIONS

3. Street Address Principal Business Office					City		State		Zip			
708 Park Avenue				Cranston		Rhode Island		02910				
4. Business Phone .	No.				of Incorpo DE IS							6. SIC Code 8318
7. Brief Description	of the Charact	er of Business Condu	icted in Rhode Is	iand								
any legal	purpose	including	styline	of	hair	and	retail	sales	of	products	connected	thereto

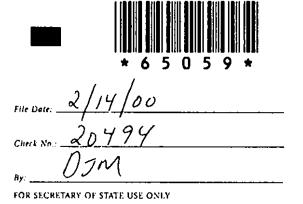
Any legal purpose	including styl:	ing of hair an	d retail sales of pr	oducts connected	d thereto
8. NAMES AND ADDRES				EFORE USING ATTACH	
Ennio Mangiocca					
Street Address			Street Address		
708 Park Avenue					
City	State	Zip	City	State	ZIP
Cranston	Rhode Island	02910			
Secretary Name	•	٠	Treasurer Name		
Street Address			Ennio Mangiocca Street Address		
			708 Park Avenue		
City	State	Zip	City	State	Zip
			Cranston	Rhode Island	02910
9. NAMES AND ADDRES	SSES OF THE DIRECT	ORS ("X" BOX FOR AT		BEFORE USING ATTAC	
Ennio Mangiocca Street Address			Street Address		
708 Park Avenue	State	Zlp	City	State	Zip
Cranston Director Name	Rhode Island	02910	Director Name		
Street Addiess			Street Address		
City	State	Zip	City	State	Zip
		*			

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

ISSUED SHARES

100

Number of Shares



10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

1000 SHARES NO PAR VAL

Class/Series

Par Value

AUTHORIZZED SHARES

Number of Shares

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. Signature of Officer

Class/Serles

Common

Par Value

-0-

Ennio Mangiocca Print or Type Name of Officer

11. SHARES ISSUED (\*X" BOX FOR ATTACHMENT)

President



(FORM MUST BE TYPED IN BLACK)

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLI MERIAD INSTRUCTIONS

1. Corporate ID No. 2. Name of Corporation 65059 Shear Genius Hair Stylists, Inc. 3. Street Address Principal Business Office Cliv 708 Park Avenue Cranston Rhode Island 02910 4. Business Phone No. 5. State of Incorporation 6. SIC Code RHODE ISLAND 8318 7. Brief Description of the Character of Business Conducted in Rhode Island Any legal purpose including styling of hari and retail sales of products connected thereto 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS SYNTAM President Name Vice President Name Ennio Mangiocca Street Address Street Address 708 Park Avenue City Cranston Rhode Island 02910 Secretary Name Treasurer Name Ennio Mangiocca Street Address Street Address 708 Park Avenue City City State Zio Cranston Rhode Island 02910 9. NAMES AND ADDRESSES OF THE DIRECTORS ('X' BOX FOR ATTACHMENT) () FILL IN SPACES BEFORE USING ATTACHMENTS ('X' BOX FOR ATTACHMENT) Director Name Director Name Ennio Mangiocca Street Address Street Address 708 Park Avenue City 210 Director Name Director Num Street Address Street Address City Zip State City State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" ROX FOR ATTACHMENT) ( 1. WOM NO) AUTHORIZED SHAKES ISSUITO SHARES Number of Shares Par Value Number of Shares Class/Series Class/Series Par Value 1000 SHARES NO PAR VAL 100 - 0 -Common

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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18714
<b>3</b> 0

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.

0	eio []] a	•	
[[]	401/110	UQLO	300
Signature	of Officer		

3-/-99

Date

Ennio Mangiocca

Print or Type Name of Officer

President



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PILIMEREAD INSIRECTIONS

(FORM MUST BE TYPED IN BLA	ICK)				
1. Corporate ID No.	2. Name of Gorpor	ation	•	•	_
65059	Shear Gen	lus Hair Stylists, Inc.	•		
3. Street Address Principal Business	Office	•	City	State	Zip
708 Park Avenue			Cranston	RI	02910
4. Business Phone No.		5. State of Incorporation	n		6. SIC Code
		RHODE ISLA	ND ·		8318
7. Brief Description of the Character	r of Business Conducted	in Rhode Island			
Any legal purpose	including st	yling of hair an	d retail sales of	products connect	ed thereto
8. NAMES AND ADDRES President Name	SES OF THE OFF	ICERS ("X" BOX FOR ATTA	ACHMENT) Vice President Name		
Ennio Mangiocca					
Street Address			Street Address		
708 Park Avenue					
City	State	Zip	City	State	Zip
Cranston	RI	02910			·
Secretary Name			Treasurer Name	•	
			Ennio Mangio	cca	
Street Address			Street Address		
			708 Park Ave	nue	
City	State	Zip	City	State	Zip
			Cranston	RI	02910
9. NAMES AND ADDRES	SES OF THE DIR	ECTORS ("X" BOX FOR AT	TACHMENT)		
Director Name			Director Name		
Ennio Mangiocca					
Street Address			Street Address		
708 Park Avenue					
Ctty	State — —	Zip	Clly	State	ZIp
Cranston Director Name	RI	02910	Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE	D (*X* BOX FOR ATT	'ACHMENT')	11. SHARES ISSUED	(*X* BOX FOR ATTACHMENT	r)
AUTHORIZED SHARES		·	ISSUED SHARES		•
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000 SHARES NO PA	AR VAL		100	Common	- 0 -

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date:	011198
Check No.:	10450
By:FOR SECRETARY O	STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statement contained herein are true and correct.

Eurio Maugineco 02-Signature of Offices Date

Ennio Mangiocca
Print or Type Name of Officer

President



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

#### PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

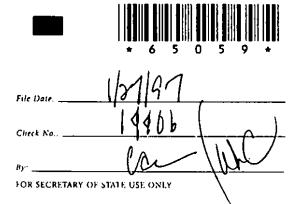
(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

65059	Shear Gen	ius Hair Stylists, Inc.			
3. Street Address Principal Business		• •	City	State	Zip
708 PARK AVENUE 4. Business Phone No.		5. State of Incorporation RHODE ISLA		RI	02910 6. SIC Code <b>8318</b>
7. Brief Description of the Character	of Business Conducted				55.5
ANY LEGAL PURPOSE 8. NAMES AND ADDRES President Name	INCLUDING S SES OF THE OFF	TYLING OF HAIR A ICERS (*x* BOX FOR ATTA	ND RETAIL SALES OF CHMENT) Vice President Name	PRODUCTS CONNEC	TED THERETO.
ENNIO MANGIOCCA Street Address			Street Address		
708 PARK AVENUE	State	Zip	Сиу	State	Zip
CRANSTON Secretary Name	RI	02910	Densurer Name ENNIO MANGIOCC	A	٠
Street Address			Street Address		
City	State	Zip	708 PARK AVENU	State	zip 02910
9. NAMES AND ADDRES Director Name	SES OF THE DIR	ECTORS ("X" BOX FOR AT		RI	32,23
ENNIO MANGIOCCA Street Address			Street Address		
708 PARK AVENUE	State	ZIp	Сиу	State	Zip
CRANSTON Director Name	RI	02910	Director Name		·
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	D AND ISSUED (	"X" BOX FOR ATTACHMENT.	ESSUED SHARUS		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Seiles	Par Value
1000 SHARES NO PA	AR VAL		100	COMMON	-0-

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of perfury, 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.

Signature of Officer Moregine Date

ENNIO	MANGIOCCA
Print or Type No	

PRESIDENT
Title of Officer

# PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State Corporations Division

Filing Period: January 1-March 1

Filing Fee: \$50.00

222-7	James K. Langevin, Secretary of State
	Corporations Division
	100 North Main Street
<b>~</b>	Providence Rhode Island, 02903-1335 • (401) 277-304

65059 She	ar Genius Hair St	ylists, Inc	Maryan ing kang panganagsan	
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		TUIT '	STATE	72F COOF
708 Park Avenue				
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	RHODE I	SLAND	1	
				8318
BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RE	100E IŞLAND			
Any_legal_purpose_including	styling of hair a	and retail sales	of products conn	ected thereto
The state of the s	IAMES AND ADDE	ESSES OF THE	OFFICERS	`
ESIDENT NAVE		VICE PRESIDENT NAME		
Ennio Mangiocca METADMESS	<del>, </del>	STREET ADORESS		<del> </del>
708 Park Avenue				
Y STATE	ZP CODE	any	STATE	77- CODE
CranstonRI	02910	İ	) 1	
CRETARY HAVE		TREASURER NAME		
		Ennio Mangi	occa	
ALET ADDARESS		STREET ADDRESS		
Y	I ZIP COD€	7.08_Park_A	venue	TZIP COOLE
9 . N	IAMES AND ADDR	CranstonCranston	DIRECTORS	02910
ECTOR HAME	· · · · · · · · · · · · · · · · · · ·	DIRECTOR HAVE	<del></del>	
Ennio Mangiocca				
LEET ADDRESS	•	STALET ADDRESS		
708_Park_Avenue	77P C00€	an	[ STATE	T2P 000E
	<b>∤</b>	<b>.</b>	31710	12 5500
CranstonRIRI	02910	DIRECTOR NAME		<del></del>
iel kodress		STREET ADDRESS	**************************************	
6				
STATE	Zir COD€	aly	STATE	ZIP CODE
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1 0 . Authorized shares		TER WAR 1220	ISSUED SHARES	
NUMBER OF SHARES CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
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1000 SHARES NO PAR VAI	<u>.                                    </u>	,,,,	<u>Common</u>	-0
	<del></del>		<del>-                                    </del>	<del> </del>
			. [	
Dropidant Vias Co.	This report must be SIC	SNED IN INK by either	r the	محين _
President, vice Pres	sident, Secretary, Assis	stant Secretary, Treasu	irer, rieceiver or trustee	
		Under penal	ty of perjury, I declare and a	affirm that I have examin
·		report, includ all statement	ding any accompanying schools contained herein are true-	euvies and statements, a and correct.

File Date: 3/13/96
Check No: 12799
By: For Secretary of State Use Only

\_\_Ennio\_Mangiocca\_\_\_ Print or Type Name of Officer

\_\_President\_\_\_\_\_ Title of Officer

Signature of Office

1./19/96\_\_\_\_ Date

ETACH BOTTOM BEFORE DETURNIAN

## State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040 401-277-3040

0065059

Corporate ID:

ANNUAL REPORT

Please Type or Print File Annually - Jan. 1 - March 1

Filing Fee \$50.00

#### Make Checks Payable to: Secretary of State

1995

Annual Report for the year:

#### ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Name of Corporation:	Shear Genius Hair	r Stylis	sts, Inc.		
Business entity organized under	the laws of the State of: Rhode Is:	land	•	heck one): pration (See RIGL Chapter 7-1.1) prvice Corporation (See RIGL Ch	
sland (Provide street address - 1		:	Any legal pu	e character of business conducted impose including sty sales of products con	ling of hair
Glen J. Sciott 935 Park Avenu Cranston, RI O Phone (401) 781-128	e 2910				
			OFFICERS ARE:		
RESIDENT		STREET ADDRESS		CITY:STATE	ZUP CODE
Ennio Mangiocc		, Cransto STREET ADDRESS		CITY:STATE	ZIL CODE
ECRETARY	<del></del> <u></u>	STREET ADDRESS		CITY/STATE	ZIP CODE
REASURER		STREET ADDRESS	;	CITY-STATE:	XIP CODE
Ennio Mangiocc		S OF THE D	IRECTORS ARE		
GAME		STREET ADDRESS		CITY/STATE	XIP CODE
Ennio Mangioco		STREET ADDRESS		CHY/STATE	Z:P CODE
SAME.		STRUET ADDRESS	:	CITY:STATE	
NUMBER OF SHARES AUTHOR	RIZED (Rider may be attached)	NU	JMBER OF SHARES I	SSUED AND OUTSTANDING (Ric	ler may be attached)
Number of Shares	Class / Series	N	amber of Shares	Class / Series	
1000	Common/ No par value		······		
Date	2 /7 , 19 95	By: Enn	enius Hair St Muu iio Mangiocca AME OF OFFICER SIGNING	giotes	
orm 31 1/95	DESIGNATED REGISTER	ritile of ortices RED AGENT		OF PROCESS:	
PLEASE NOTE: If the register	red office and/or registered agent indica	ated below is in	icorrect, Form 9 must		
				C38 1 14	
935 P	J. SCIOTTI ARK AVENUE, SUITE 2:	10		FEB 1 0 1995	mac
CRANS	TON RI 02910			Ch# 11018	

Filing Fee \$50.00 Payable to Secretary of State

#### PLEASE TYPE or PRINT

#### State of Rhode Island and Providence Plantations Office of The Secretary of State

File Annually
LLC Sept. 1 Nov. 1
CORP Jan. 1 March 1

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID:	0065059		Annual Report for the year	1994	
Name of Business Entity _			Shear Genius	Hair Stylists,	Inc.
Business entity organized under	the laws of the State of	Rhode Island	Business Entity is refer	ck one)	
Federa, Taxpayer Identification			i	orporation (See RIGL Chap's at Service Corporation (See R	
her topings entry, address and t	-	pal effice	1 ' '	ability Company (See RIGL	
<u> </u>			1	address of contact person to	whom
			communications may b	edneded Liotti, Esq.	
				Aveune	
Phone ( - > )			Cranston,	RI 02910	
Address and telephone of the pr		entity in Rhode			
Island (Provide street address)  c/o Glen J. Scio				hard eter of business conducto	
935 Park Ave				oose including sty	
Cranston, RI	· <del></del>			les of products co July 29, 1991	
Phone ( 401) 781-128				r do business in Rhede Island	
1.ttak			Same		
		THE NAMES OF T	HE OFFICERS ARE:	·····	
🗷 жез это инэктипэ 🗒 . м	kmasasimatra TT nnio Mangiocca	NIRLES	D#(35	inv <sub>e</sub> vii	x e gone.
. По поряжущьююю — — — — — — — — — — — — — — — — — —	**	STREET	STARES S	SUAN AH	<u> </u>
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The contrast was truck &	TSLAS BERICKATO A	V 1118 2	:DeLeA	EBYN AH	- Zi scon.
<u> </u>	nnio Mangiocca		to bibliograms and		
£465		SISTER STATES	HE DIRECTORS ARE:	CITY N. VIII.	· - 21 CODE
Ennio Mangiocca		STRICTA	:	CHANAII,	X4.0 20_
NW -		St diffa	BdW	říty sván	
NUMBER OF SHARES AUT	HORIZED (II Applicabl	v)	NUMBER OF SHARES IS	 SSUED AND OUTSTAND!	NG (If Applicable)
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CLASS			CLASS		
SERIES			SERIES		
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Date February 14,	. 19_94	X <sub>By</sub> <u>&amp;</u>	Luis Mougio	rcee	
1	FILED		nio Mangiocca		
ħ'	IAR 7 1994		rs:sampora neresonad esident		
EV	OrbU#92		C RESIDENC		<del></del>
Form 31 - 194	SICNATED DECIS	TEDEN OD DECIN	ENT AGENT FOR SERV	TICE OF PROCESS.	

January ascand mais ir asc

## State of Rhode Island and Providence Plantations

#### CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

·	orated under the laws of		.,	
	business, briefly stated, is			
	sales of products conn			
FOURTH: If foreign co	orporation, address of its prin	cipal office <sup>N/A</sup>	<b>.</b>	
FIFTH: Business addre	ess in Rhode Islandc/o_G	len J. Sciotti, E	sq., 935 F	ark Avenue,
Suite 210, Cranston	, RI 02910		*************	······································
SIXTH: Names and ad	dresses of its directors and of		ncluding number, si	(Attach rider if necessar
Ennio Mangiocca	Director	708 Park Avenu	ie Apt. В	Cranston, RI 0291
····· ··· ··· ··· ···· ···· ··· ··· ··	Director		•••••	
	Director	,	•••••••	
Ennio Mangiocca	President	708 Park Avenu	ie Apt. B (	Cranston, RI 0291
Ennio Mangiocca	Vice President	708 Park Aveni	ie Apt. B (	Cranston, RI 02910
Ennio Mangiocca	Secretary	708 Park Avenu	ie Apt. B (	Cranston, RI 02910
Ennio Mangiocca	Treasurer	708 Park Avenu	ie Apt. B (	Cranston, RI 02910
	Shares authorized:			Par Value or statement that shares are without
No of Shares 1000	Common	Series		par value No Par Value
1000	Common		1	NO TAL VALUE
Eібіітн: Number of S.	hares issued:	WALLS NOV	18 <b>1993</b>	Par Value or statement that
No. of Shares	Class	Series		shares are without par value
Dated 9/24	19 973 (Nam	Shear Genius Hair	r Stylist,	Inc.
(Report must be signe		Ennio Mangiocca President	Men.	gioceo

Form 31 1/85

# State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 00	65059	Annual Rej	port for the year992		
FIRST: The name of the corporation is Shear Genius Hair Stylists, Inc.					
Second: It is in	ncorporated under the laws	s of State of Rhoo	de Island		
	ter of business, briefly state		e including styling of hair		
FOURTH: If fore	eign corporation, address o	of its principal office	N/A		
	address in Rhode Island	C/O Glen J. Sciott	£ Esq., 935∣Park Avenue,		
SIXTH: Names a	and addresses of its directo		(Attach rider if necessary) ess (including number, street, zip code)		
Ennio Mangioc	ca Direct	tor 20 Belgium St	treet, Cranston, RI 02920		
Rosann Mangio	cca Direct	tor Same			
	Direct	or			
Ennio Mangioc	ca Presid	ent			
Rosann Mangio	cca Vice P	President			
Rosann Mangio					
Ennio Mangioc		•			
SEVENTH: Num	per of Shares authorized:		Par Value or statement that shares are without		
No. of Shares	Class	Series	par value		
1000	Common	MALLO De	No Par Value		
Еіднтн: Numb	er of Shares issued:	Ros's & Piled	NOV 1 8 1993 Par Value Shares are without		
No. of Shares	Class	Series	par value		
Dated9	1993	Shear Genius (Name of Corporation)	Hair Stylist, Inc.		
(Report must	be signed by an officer)	By Ennio Mangioo Title President	o (Mougioceo)		