	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S	Street	
HOPE	Providence RI 029 (401) 222-30		
Limited Liability Co Annual Report Filing Period: Septembe			
to file its annual report v	G.L. 7-16-66(d), each limited liability com vithin thirty (30) days after the time preso o a penalty fee of \$25.00.		
ANNUAL REPORT YEA	<b>AR:</b> <u>2020</u>		
1. ID No. <u>001683</u>	852		
2. Exact Name of the	e Limited Liability Company <u>Victoria</u>	's Beauty Salon LLC	
3. State of Formation	n		
State: <u>RI</u>			
	ARTICLE III		
-	CS Code that best describes the primary More information on <u>NAICS</u> can be found		y the entity. Download
<u>812112</u>			
4. Brief Description o	f the Character of the Business Whic	h is Actually Conduct	ed in Rhode Island
BEAUTY PARLOR			
5. Principal Office Ad	dress		
-	419 HARTFORD AVE	DI =: 02000	
· -	PROVIDENCE State:		Country: <u>USA</u>
-	f Limited Liability Company and Nam	e or Title of Contact I	Person:
	<u>A Y. TAVERAS</u> Contact Title: 19 HARTFORD AVE		
	ROVIDENCE State:	: <u>RI</u> Zip: <u>02909</u>	Country: <u>USA</u>
		bility Company, if Ap	
· <u> </u>	s of Each Manager of the Limited Lial BERS	· · · · · · · · · · · · · · ·	plicable.
7. Name and Address	-		plicable. dress

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

ROSA Y. TAVERAS 419 HARTFORD AVE PROVIDENCE , RI 02909

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 6 Day of October, 2020 at 1:29:11 PM by the authorized person.** *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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By <u>ROSA Y. TAVERAS</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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