



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021

Corporation:

→ Filing period: January 1 - March 1

→ Filing Fee: \$0.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

MAR 09 2021

BY

201470

1. Entity ID Number 000651599		2. Exact name of the Corporation Unique Eyebrow Threading, Inc.			
3. Principal Office Address 3057 Diamond Hill Rd.			City Cumberland	State RI	Zip 02864
4. NAICS Code 812112		6. Brief description of the character of business conducted in Rhode Island Salon Limited Service			
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 Komal Singh			Vice-President Name		
Street Address 3057 Diamond Hill Rd			Street Address		
City Cumberland	State RI	Zip 02864	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name Komal Singh			Director Name		
Street Address 3057 Diamond Hill Rd			Street Address		
City Cumberland	State RI	Zip 02864	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State.		Check the box to indicate an attachment <input type="checkbox"/>			
Changes require an additional filing.		NUMBER OF SHARES 100	CLASS/SERIES CNP	PAR VALUE	
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 Komal Singh				Date 03/01/2021	
Signature of Authorized Representative 					