



State of Rhode Island  
**Department of State - Business Services Division**

**FILED**

APR 13 2021

BY SA 1007

**Annual Report for the year: 2020**  
**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.

1. Entity ID Number <b>001664406</b>		2. Exact name of the Limited Liability Company <b>PMBL, LLC</b>					
3. NAICS Code 812199		4. Brief description of the character of business conducted in Rhode Island PERMANENT MAKEUP					
5. State of Formation RHODE ISLAND							
6. Principal Office Address 478 RESERVOIR AVENUE UNIT A				City CRANSTON		State RI	Zip 02910
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name NATALIE RUANO				Contact Title MEMBER			
Street Address 478 RESERVOIR AVENUE UNIT A				City CRANSTON		State RI	Zip 02910
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name N/A				Manager Name N/A			
Street Address				Street Address			
City		State	Zip	City		State	Zip
Manager Name N/A				Manager Name N/A			
Street Address				Street Address			
City		State	Zip	City		State	Zip
Check the box to indicate an attachment <input type="checkbox"/>							
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.							
<b>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.</b>							
Name of Authorized Person NATALIE RUANO						Date 03/28/2021	
Signature of Authorized Person							

**MAIL TO:**  
 Division of Business Services  
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