



State of Rhode Island  
Department of State - Business Services Division

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R.I. DEPT. OF STATE  
BUS SVCS DIV  
FOR  
SECRETARY OF STATE  
USE ONLY  
2023 DEC -1 A 10:43

Annual Report for the year: 2021  
Limited Liability Company

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number <b>001707866</b>		2. Exact name of the Limited Liability Company <b>moroccan hair salon llc</b>	
3. NAICS Code <b>812112</b>		4. Brief description of the character of business conducted in Rhode Island <b>Salon</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>99 Poyle Ave Providence</b>		City <b>Providence</b>	State <b>RI</b>
Zip <b>02906</b>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>CLAUDE Medina</b>		Contact Title <b>OWNER</b>	
Street Address <b>99 Poyle Ave</b>		City <b>Providence</b>	State <b>RI</b>
Zip <b>02906</b>			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9 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 Person <b>CLAUDE Medina</b>		Date <b>12/1/2023</b>	
Signature of Authorized Person 			

FILED

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BY ML BXYQS  
10:44

MAIL TO:  
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