



State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD
24 JUL 16 PM 10:55:35

Annual Report for the year: 2024
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 001745344		2. Exact name of the Limited Liability Company JOSEPHINE AND FAMILY BEAUTY SUPPLY LLC	
3. NAICS Code 452311		4. Brief description of the character of business conducted in Rhode Island RETAIL SALES	
5. State of Formation RI			
6. Principal Office Address 18 KNOWLES STREET		City PAWTUCKET	State RI
		Zip 02860	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name JOSEPHINE OCRAN		Contact Title	
Street Address 18 KNOWLES STREET		City PAWTUCKET	State RI
		Zip 02860	
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 JOSEPHINE OCRAN		Date 07/15/2024	
Signature of Authorized Person <i>Josephine Ocran</i>			

W3 FILED *1055*
JUL 16 2024
BY *QY XFY*

MAIL TO:
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