State of Rhode Island
Department of State - Business Services Division

RECORDED 350
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Annual Report for the year: 2025
Corporation

→ 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 Numbe 001702398	2. Exact name of the Corporation Beauty and the Beard, Inc.		
3. Principal Office Address 384 Market Street	City Warren	State RI	Zip 02885
3. NAICS Code 812111	4. Brief description of the character of business conducted in Rhode Island Salon		
5. State of Incorporation RI			

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name Patrick Cleary			Vice-President Name Stephanie Cleary		
Street Address 528 South St			Street Address 528 South St		
City Somerset	State MA	Zip 02726	City Somerset	State MA	Zip 02726
Secretary Name Stephanie Cleary			Treasurer Name Patrick Cleary		
Street Address 528 South St			Street Address 528 South St		
City Somerset	State MA	Zip 02726	City Somerset	State MA	Zip 02726

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. Shares Authorized	10. Shares Issued — Check the box to indicate an attachment ☐		
	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
This information is currently of record in the Department of State. **Changes require an additional filing.**	100	Common	100

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	Date
Patrick Cleary	

Signature of Authorized Representative

X

FILED

MAR 26 2025
BY 5054

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040

Website: www.sos.ri.gov

FORM 630- Revised: 12/2023