RI SOS Filing Number: 202568679410 Date: 4/1/2025 4:00:00 PM



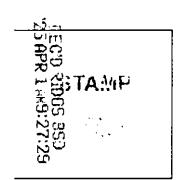
State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2025
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.



Entity ID Number	2. Exact name of the Limited Liability Company				
001699628	Jasmine Facial	Jasmine Facial Spa LLC 4. Brief description of the character of business conducted in Rhode Island			
3. NAICS Code	4. Brief description of the				
812177	Facial Spa				
5. State of Formation					
RI					
6. Principal Office Address		City	State	Zip	
243 Main St		Pawtucket	RI	02860	
7. Mailing Address of Limite	ed Liability Company and Name	or Title of Contact Person	•		
Contact Name Tony Ngo		Contact Title President			
Street Address 500 Mendon Rd Apt 25		City Cumberland	State RI	^{Zip} 02864	
8. The Resident Agent infor	mation currently of record with	the RI Department of State is accur	ate. Changes requir	e filing Form 642.	
	y, I declare and affirm that I h tatements contained herein a	nave examined this report, including true and correct.	ing any accompany	ying schedules and	
Name of Authorized Person			Date		
Tony Ngo			7-27-25		
Signature of Authorized Per	rson				
In the second					

FILED

APR 0 1 2025

MAIL TO: Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov BY 28TPK