

Annual Report for the year:
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.

REC '25 M	
RECID RIDOS BSD 25 MRY 5 FM4:25:50	

1. Entity ID Number	2. Exact name of the Limited Lia	bility Company				
1764369	H&D Bla	uty Studio	LLC	· 		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
1 812117						
5. State of Formation	Hair design Shop					
RI	Have de	sugs, sho				
6. Principal Office Address	-	City	State	Zip		
483 Post	Rd	Warrence	RJ	02888		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name	1 -4	Contact Title				
Sdanlly	Herringon	Duner				
Street Address	el hill are	City nonton.	State	2ip 02927		
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	//		Date	/		
Slaullyt	MUMA GOL	<u>) </u>	5/6	125		
Signature of Authorized Person	Madles A					
720						

MAIL TO:

Division of Business Services

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

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