

State of Rhode Island Department of State - Business Services Division

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.

1. Entity ID Number	2. Exact name of the Limited Liability Company			
01097484	Jebes LC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
23 (022 0) 5. State of Formation	Beauty So	bn		
6. Principal Office Address		City	State	Zip
266 Front St.	<u> </u>	Linceln	PI	02865
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Jovce Stenovitch		Owner		
Street Address		City	State	Zip
21 Fales S	t	(ranston	K4_	02920
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	,
Edward Sternwitch			7/30/	25
Signature of Authorized Person				
Chinand Descritor				

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MAIL TO:

Division of Business Services

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

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