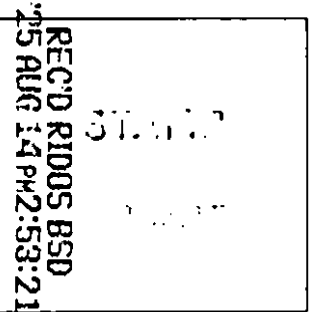




State of Rhode Island
Department of State - Business Services Division



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 001705864		2. Exact name of the Limited Liability Company KISMET SALON, LLC	
3. NAICS Code 81211		4. Brief description of the character of business conducted in Rhode Island HAIR AND NAIL SALON	
5. State of Formation RI			
6. Principal Office Address 236 WAYLAND AVE		City CRANSTON	State RI
		Zip 02920	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name ANITA BARBERA		Contact Title OWNER	
Street Address 81 MOUNT VIEW DR		City CRANSTON	State RI
		Zip 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 ROBERT J BARBERA		Date 8/5/2025	
Signature of Authorized Person <i>Robert J Barbera</i>			

FILED

AUG 14 2025
 BY **NXRGT**
254

MAIL TO:

Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov