



Form Revision Date 07/2016

## ANNUAL REPORT

*(Required by Section 911, Act 284, Public Act of 1972)*

The identification number assigned by the Bureau is: 800670595

Annual Report Filing Year: 2017

1. Corporation Name:  
LOCKS 4 LIFE, LTD.

2. The street address of the corporation's registered office and the name of the resident agent at that office:

1. Resident Agent Name: PAULETTE BROWN

2. Street Address: 26125 GREENFIELD

Apt/Suite/Other:

City: SOUTHFIELD

State: MI Zip Code: 48076

3. Mailing address of the corporation's registered office:

P.O. Box or Street Address: 26125 GREENFIELD

Apt/Suite/Other:

City: SOUTHFIELD

State: MI Zip Code: 48076

4. Provide the names and business or residence addresses of the corporations board of directors and its president, treasurer, and secretary:

| Title     | Name           | Residence or Business Address              |
|-----------|----------------|--|
| PRESIDENT | PAULETTE BROWN | 26125 GREENFIELD, SOUTHFIELD, MI 48076 USA |
| TREASURER | PAULETTE BROWN | 26125 GREENFIELD, SOUTHFIELD, MI 48076 USA |
| SECRETARY | PAULETTE BROWN | 26125 GREENFIELD, SOUTHFIELD, MI 48076 USA |
| DIRECTOR  | PAULETTE BROWN | 26125 GREENFIELD, SOUTHFIELD, MI 48076 USA |

5. Describe the general nature and kind of business in which the corporation is engaged in during the year covered by this report:

BEAUTY SHOP

This document must be signed by an authorized officer or agent:

Signed this 10th Day of October, 2019 by:

| Signature      | Title     | Title if "Other" was selected |
|----------------|-----------|-------------------------------|
| Paulette Brown | President |                               |

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline  Accept

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS**

**FILING ENDORSEMENT**

***This is to Certify that the*** 2017 ANNUAL REPORT

***for***

LOCKS 4 LIFE, LTD.

***ID Number:*** 800670595

***received by electronic transmission on*** October 10, 2019 ***, is hereby endorsed.***

***Filed on*** October 11, 2019 ***, by the Administrator.***

***The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.***



***In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 11th day of October, 2019.***

***Julia Dale, Director***

***Corporations, Securities & Commercial Licensing Bureau***