



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2611
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 58159		2. Name of Corporation Tony's Cleaning Service, Inc.			
3. Street Address Principal Business Office 27 Tanglewood Drive			City Cumberland	State RI	Zip 02864
4. Business Phone No. 334-0653		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island CLEANING BUSINESS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Antonio Candeias			Vice President Name Vacant		
Street Address 27 Tanglewood Drive			Street Address		
City Cumberland	State RI	Zip 02864	City	State	Zip
Secretary Name Debra A. Candeias			Treasurer Name Debra A. Candeias		
Street Address Same as above			Street Address Same as above		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Antonio Candeias			Director Name Debra A. Candeias		
Street Address Same as above			Street Address Same as above		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.					
ISSUED SHARES - THIS SECTION MUST BE COMPLETED					
Number of Shares 10		Class/Series COMMON		Par Value NO PAR	

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date 2-3-09
Check No. 8055
By: MNC
FOR SECRETARY OF STATE USE ONLY

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.

Antonio Candeias 2-1-09
Signature Date
ANTONIO CANDEIAS
Print or Type Name
PRESIDENT
Title