



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 02904-261
401.222.304

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. **92121** 2. Name of Corporation **TEW INC.**

3. Street Address Principal Business Office **202 New Meadow Road** City **Barrington** State **RI** Zip **02806**

4. Business Phone No. **245-2970** 5. State of Incorporation **Rhode Island**

6. Brief Description of the Character of Business Conducted in Rhode Island
Owning and operating a commercial laundromat

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **Timothy E. Woodward** Vice President Name **Sandra Woodward**

Street Address **202 New Meadow Road** Street Address **202 New Meadow Road**

City **Barrington** State **RI** Zip **02806** City **Barrington** State **RI** Zip **02806**

Secretary Name **Timothy E. Woodward** Treasurer Name **Timothy E. Woodward**

Street Address **202 New Meadow Road** Street Address **202 New Meadow Road**

City **Barrington** State **RI** Zip **02806** City **Barrington** State **RI** Zip **02806**

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **Timothy E. Woodward** Director Name

Street Address **202 New Meadow Road** Street Address

City **Barrington** State **RI** Zip **02806** City State Zip

Director Name Director Name

Street Address Street Address

City State Zip City State Zip

9. SHARES AUTHORIZED 2,000 Common No Par Value 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

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.	Number of Shares	Class/Series	Par Value
	100	Common	No Par Value
	THIS SECTION MUST BE COMPLETED		

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.

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.

Signature **Timothy E. Woodward** Date **2-20-09**

Print or Type Name **Timothy E. Woodward**

Title **President**

File Date **3-2-09**
Check No. **2091**
By **mmc**
FOR SECRETARY OF STATE USE ONLY