



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 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

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. 108102		2. Name of Corporation New England Industrial Uniform Rental Service, Inc.		
3. Street Address Principal Business Office 355 Union St		City West Springfield	State MA	Zip 01089
4. Business Phone No. 413-781-5662		5. State of Incorporation Massachusetts		
6. Brief Description of the Character of Business Conducted in Rhode Island Uniform Rental				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Michael A. Ardolino		Vice President Name Matthew D. Ardolino		
Street Address 12 Old Farm Road		Street Address 106 Hunters Green Circle		
City Wilbraham	State MA	Zip 01095	City Agawam	Zip 01001
Secretary Name Patricia A. Ardolino		Treasurer Name Same as Vice President		
Street Address 19 Blacksmith Rd		Street Address		
City Wilbraham	State MA	Zip 01095	City	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Antonio F. Ardolino		Director Name Same as Officers		
Street Address 19 Blacksmith Rd		Street Address Patricia, Michael & Matthew		
City Wilbraham	State MA	Zip 01095	City	Zip
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	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 <u>MUST</u> BE COMPLETED		
		Number of Shares 2400	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.

FILED

File Date JAN 19 2012
 Check No. By AMC
65779
 By: _____
 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.

A F Ardolino 1-11-12
 Signature Date
A F Ardolino
 Print or Type Name
CEO
 Title