

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.	- Ia	me of the Cornection			ALST TEL.
44401	Legio	n com, La car	INA TIK	·	
3. Principal office address	<u> </u>		City	State	Zip
661 Park Avenue			Cranston	RI	02910
4. Business Phone No. 401 781 8888			5. State of Incorporation Rhode Island		
6. Brief description of the char		s conducted in Rhode Islan	d		
Laundry and dry clea	ning.				SEC CO 2014
7. LIST ALL OFFICERS (NA	MES AND ADD	RESSES) ("X" BOX FOR A	TTACHMENT)		3 33
President Name Marshall D'Ambrosio, Jr.			Vice-President Name		
Street Address 661 Park Avenue			Street Address		
City Cranston	State Ri	Zip 02910	City	State	Zip & STA
Secretary Name John K. Greim, Sr.			Treasurer Name John K. Greim, Sr.		
Street Address 661 Park Avenue			Street Address 661 Park Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
8. LIST ALL DIRECTORS (N	AMES AND AD	DRESSES) ("X" BOX FOR	ATTACHMENT)	. , I	
Director Name Marshall D'Amborsio, Jr.			Director Name John K. Greim, Sr.		
Street Address 661 Park Avenue			Street Address 661 Park Aven	ue	
City Cranston	State RI	Zip 02910	City State Cranston RI		Zip 02910
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
			40.011.000.001.001.00		
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) NUMBER OF SHARES CLASS/SERIES PAR VALUE		
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.			600	Common	No Par Value
			000	Common	140 Fai Value
This report must be executed	on behalf of the	e corporation by an authorize	d representative. If the	corporation is in the hand	s of a receiver or trustee,
		ust be executed on behalf of	the corporation by the	receiver or trustee.	
File Date			this repositional	perjury, declare and affi ing any accompanying s	chedules and statements
Check No		FILED	ang gravai staten	ents contained herein a	3-/4-14
Ву:		MAR 19 2014	Signature of Autho	rised Representative	Date
FOR SECRETARY OF STAT	E USE ONLY	MINI	-	nbrosio, Jr., Preside	ent
	By.	44.8000 I	/-	of Authorized Representa	
orm No. 630 levised: 01/2012	_,-	- iΛ ·Λ			
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