



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. 144305		2. Exact name of the Corporation Elmwood Fashion & Services, Inc.				
3. Principal office address 489 Elmwood Avenue			City Providence	State RI	Zip 02907	
4. Business Phone No. 401-461-7939			5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Clothing and accessories, retail sales and related matters and any other lawful business.						
President Name Wilbert Tejada			Vice-President Name Evelyn Tejada			
Street Address same as above			Street Address same as above			
City	State	Zip	City	State	Zip	
Secretary Name Evelyn Tejada			Treasurer Name Wilbert Tejada			
Street Address same as above			Street Address same as above			
City	State	Zip	City	State	Zip	
Director Name None			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
SHARES AUTHORIZED <input type="checkbox"/> SHARES ISSUED <input type="checkbox"/> FOREIGN SHARES HELD <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.				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
				66	Common	No Par Value

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 SECRETAR OF STATE
 CORPORATIONS DIV

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

APR 21 2014

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.

Wilbert Tejada
 Signature of Authorized Representative Date

Wilbert Tejada, President
 Print or Type Name of Authorized Representative

By 49-222678
 A.A.