



**State of Rhode Island and Providence Plantations  
Department of State - Business Services Division**

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RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV.  
2016 JUN 30 PM 2:29

**Profit Corporation Annual Report for the year:** 2016

Filing period: January 1 - March 1

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

1. Entity ID Number		2. Exact name of the Corporation					
797785		NEW WAY MULTISERVICE INC.					
3. Principal Office Address				City	State	Zip	
624 CRANSTON ST				PROVIDENCE	RI	02907	
4. Business Phone Number				5. State of Incorporation			
				RI			
6. Brief description of the character of business conducted in Rhode Island							
MULTISERVICE PURPOSE							
7. List ALL officers (names and addresses)							Check the box to indicate an attachment <input type="checkbox"/>
President Name				Vice-President Name			
ELAINE GRULLON							
Street Address				Street Address			
101 LEXINGTON AVE							
City	State	Zip	City	State	Zip		
PROVIDENCE	RI	02907					
Secretary Name				Treasurer Name			
Street Address				Street Address			
City	State	Zip	City	State	Zip		
8. List ALL directors (names and addresses)							
Director Name				Director Name			
Street Address				Street Address			
City	State	Zip	City	State	Zip		
9. Shares Authorized							
10. Shares Issued				Check box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
				8,000			
11. 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. <b>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.</b>							
Name of Authorized Representative					Date		
Elaine Grullon					6/29/16		
Signature of Authorized Representative					SIGN DOCUMENT HERE		

2:29 pm  
**FILED**  
JUN 30 2016  
By 278083 KM