



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

Annual Report for the year: 2017
 Corporation

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

2017 AUG 11 PM 12:01

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 104083		2. Exact name of the Corporation THE LAUNDRY BASKET INC.			
3. Principal Office Address 521 Pontiac Ave			City Cranston	State RI	Zip 02910
4. NAICS Code 81		6. Brief description of the character of business conducted in Rhode Island the business of operating laundromats			
5. State of incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Kenneth R. Merwick			Vice-President Name		
Street Address 10 Hans St			Street Address		
City Cranston	State RI	Zip 02910	City	State	Zip
Secretary Name LINDA S Merwick			Treasurer Name Linda Merwick		
Street Address 10 Hans St			Street Address 10 Hans St		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			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
9. Shares Authorized		10. Shares Issued Check the 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
		100 Shares		Common	no par value
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. 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.					
Name of Authorized Representative Linda Merwick					Date 8/11/17
Signature of Authorized Representative <i>Linda Merwick</i>					

FILED
 SIGN DOCUMENT HERE

AUG 11 2017

BY 310125
AA 12:05 PM