



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 92121		2. Name of Corporation TEW INC.		
3. Street Address Principal Business Office 202 New Meadow Road			City Barrington	State RI
4. Business Phone No. 245-2970		5. State of Incorporation RHODE ISLAND		6. SIC Code 8896
7. Brief Description of the Character of Business Conducted in Rhode Island OWNING AND OPERATING A COMMERCIAL LAUNDROMAT.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Timothy E. Woodward			Vice President Name Sandra Woodward	
Street Address 202 New Meadow Road			Street Address 202 New Meadow Road	
City Barrington	State RI	Zip 02806	City Barrington	Zip 02806
Secretary Name Timothy E. Woodward			Treasurer Name Timothy E. Woodward	
Street Address 202 New Meadow Road			Street Address 202 New Meadow Road	
City Barrington	State RI	Zip 02806	City Barrington	Zip 02806
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Timothy E. Woodward			Director Name	
Street Address 202 New Meadow Road			Street Address	
City Barrington	State RI	Zip 02806	City	Zip
Director Name			Director Name	
Street Address			Street Address	
City	State	Zip	City	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>	
ISSUED SHARES				
Number of Shares	Class Series	Par Value	Number of Shares	Class Series
2,000 NO PAR VALUE			100	Common
				No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FILED

File Date: MAR 08 2005

Check No. _____

By: [Signature]

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.

[Signature] 3-1-05
Signature of Officer Date

Timothy E. Woodward
Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

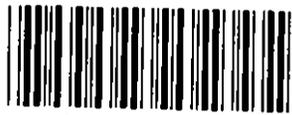
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

Form with sections for Corporate ID No, Name of Corporation, Street Address, Business Phone No, State of Incorporation, Brief Description of Business, Officers (President, Vice President, Secretary, Treasurer), and Directors (Name and Address).

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 2-25-04
Check No: 3119
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report...
Signature of Officer: Timothy E. Woodard
Date: 2-24-04
Title of Officer: President



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

92121 TEW INC.

3. Street Address Principal Business Office

202 New Meadow Road

City

Barrington

State

RI

Zip

02806

4. Business Phone No.

245-2970

5. State of Incorporation

RHODE ISLAND

6. SIC Code

8896

7. Brief Description of the Character of Business Conducted in Rhode Island

Operation of laundromat and services to public etc.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Timothy E. Woodward

Street Address

202 New Meadow Road

City State Zip
Barrington RI 02806

Vice President Name

Sandra Woodward

Street Address

202 New Meadow Road

City State Zip
Barrington RI 02806

Secretary Name

Timothy E. Woodward

Street Address

202 New Meadow Road

City State Zip
Barrington RI 02806

Treasurer Name

Timothy E. Woodward

Street Address

202 New Meadow Road

City State Zip
Barrington RI 02806

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Timothy E. Woodward

Street Address

202 New Meadow Road

City State Zip
Barrington RI 02806

Director Name

Street Address

City State Zip

Street Address

City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

2,000 NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares Class/Series Par Value

100 Common No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 2 1 2 1 *

File Date: 4-7-03

Check No.: 2823

By: [Signature] 10P

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.

[Signature] 2-1-03
Signature of Officer Date

Timothy E. Woodward
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **92121** 2. Name of Corporation **TEW INC.**
3. Street Address Principal Business Office **202 New Meadow Road** City **Barrington** State **RI** Zip **02806**
4. Business Phone No. **245-2970** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8896**

7. Brief Description of the Character of Business Conducted in Rhode Island
Operation of laundromat and services to public etc.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Timothy E. Woodward	Vice President Name Timothy E. Woodward
Street Address 202 New Meadow Road	Street Address 202 New Meadow Road
City State Zip Barrington RI 02806	City State Zip Barrington RI 02806
Secretary Name Timothy E. Woodward	Treasurer Name Timothy E. Woodward
Street Address 202 New Meadow Road	Street Address 202 New Meadow Road
City State Zip Barrington RI 02806	City State Zip Barrington RI 02806

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Timothy E. Woodward	Director Name
Street Address 202 New Meadow Road	Street Address
City State Zip Barrington RI 02806	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
2,000 NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
100 Common No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 2 1 2 1 *

File Date: 3.4.02
Check No.: 2510
By: [Signature]

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.

[Signature] 2-28-02
Signature of Officer Date

Timothy E. Woodward
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

92121 TEW INC.

3. Street Address Principal Business Office

202 New Meadow Road

4. Business Phone No.

245-2970

5. State of Incorporation

RHODE ISLAND

City

Barrington

State

RI

Zip

02806

6. SIC Code

8896

7. Brief Description of the Character of Business Conducted in Rhode Island

Operation of laundromat and services to public etc.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Timothy E. Woodward

Street Address

202 New Meadow Road

City

Barrington

State

RI

Zip

02806

Vice President Name

Timothy E. Woodward

Street Address

202 New Meadow Road

City

Barrington

State

RI

Zip

02806

Secretary Name

Timothy E. Woodward

Street Address

202 New Meadow Road

City

Barrington

State

RI

Zip

02806

Treasurer Name

Timothy E. Woodward

Street Address

202 New Meadow Road

City

Barrington

State

RI

Zip

02806

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Timothy E. Woodward

Street Address

202 New Meadow Road

City

Barrington

State

RI

Zip

02806

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

2,000 SHS NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 2 1 2 1 *

File Date: 3-13-01

Check No.: 2243

By: [Signature]

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.

[Signature] 3-1-01
Signature of Officer Date

Timothy E. Woodward
Print or Type Name of Officer President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **92121** 2. Name of Corporation **TEW INC.**

3. Street Address Principal Business Office **202 New Meadow Road** City **Barrington** State **RI** Zip **02806**
4. Business Phone No. **245-2970** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8896**

7. Brief Description of the Character of Business Conducted in Rhode Island
Operation of laundromat and services to public etc.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Timothy E. Woodward Street Address 202 New Meadow Road City Barrington State RI Zip 02806 Secretary Name Timothy E. Woodward Street Address 202 New Meadow Road City Barrington State RI Zip 02806	Vice President Name Timothy E. Woodward Street Address 202 New Meadow Road City Barrington State RI Zip 02806 Treasurer Name Timothy E. Woodward Street Address 202 New Meadow Road City Barrington State RI Zip 02806
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9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Timothy E. Woodward Street Address 202 New Meadow Road City Barrington State RI Zip 02806	Director Name Timothy E. Woodward Street Address 202 New Meadow Road City Barrington State RI Zip 02806
--	--

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	2,000 SHS	NO PAR VALUE	

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	100	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 2 1 2 1 *

File Date: 3/3/00
Check No.: 1897
By: [Signature]

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.

Timothy E. Woodward 2/28/2000
Signature of Officer Date

Timothy E. Woodward
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **92121** 2. Name of Corporation **TEW INC.**

3. Street Address Principal Business Office **30 Sachem Road** City **East Prov.** State **RI** Zip **02915**
4. Business Phone No. **433-2708** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8898**

7. Brief Description of the Character of Business Conducted in Rhode Island
Mail order medical supplies.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name			Vice President Name		
Timothy E. Woodward			Timothy E. Woodward		
Street Address			Street Address		
30 Sachem Road			30 Sachem Road		
City	State	Zip	City	State	Zip
E Providence	RI	02915	E Providence	RI	02915
Secretary Name			Treasurer Name		
Timothy E. Woodward			Timothy E. Woodward		
Street Address			Street Address		
30 Sachem Road			30 Sachem Road		
City	State	Zip	City	State	Zip
E Providence	RI	02915	E Providence	RI	02915

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name			Director Name		
Timothy E. Woodward					
Street Address			Street Address		
30 Sachem Road					
City	State	Zip	City	State	Zip
E Providence	RI	02915			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
2,000 SHS	NO PAR VALUE	

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 2 1 2 1 *

File Date: Feb 19, 1999
Check No.: 1646
By: [Signature]

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.

[Signature] 2-15-99
Signature of Officer Date
Timothy E. Woodward
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 98

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 92121 2. Name of Corporation TEW INC.
3. Street Address Principal Business Office City State Zip
30 Sachem Road East Providence RI 02915
4. Business Phone No. 433-2708 5. State of Incorporation Rhode Island 6. SIC Code 8896
7. Brief Description of the Character of Business Conducted in Rhode Island

Laundromat

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name <u>Timothy E. Woodward</u> Street Address <u>30 Sachem Road</u> City State Zip <u>East Prov. RI 02915</u>	Vice President Name <u>Timothy E. Woodward</u> Street Address <u>30 Sachem Road</u> City State Zip <u>East Prov. RI 02915</u>
Secretary Name <u>Timothy E. Woodward</u> Street Address <u>30 Sachem Road</u> City State Zip <u>East Prov. RI 02915</u>	Treasurer Name <u>Timothy E. Woodward</u> Street Address <u>30 Sachem Road</u> City State Zip <u>East Providence RI 02915</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name <u>Timothy E. Woodward</u> Street Address <u>30 Sachem Road</u> City State Zip <u>East Prov. RI 02915</u>	Director Name Street Address City State Zip
Director Name Street Address City State Zip 	Director Name Street Address City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<u>2000</u>	<u>Common</u>	<u>No Par Value</u>

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<u>100</u>	<u>Common</u>	<u>No Par Value</u>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date: 5-22-98
Check No.: 1214
By: TMF

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.

Timothy E. Woodward 5-18-98
Signature of Officer Date

Timothy E. Woodward
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 92121 2. Name of Corporation OCEAN STATE CAR WASH, INC.
3. Street Address Principal Business Office 30 Sachem Road City East Providence State RI Zip 02915
4. Business Phone No. 433-2708 5. State of Incorporation Rhode Island 6. SIC Code 8896
7. Brief Description of the Character of Business Conducted in Rhode Island
Car Wash

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name	Timothy E. Woodward	Vice President Name	Timothy E. Woodward
Street Address	30 Sachem Road	Street Address	30 Sachem Road
City	East Prov.	City	East Prov.
State	RI	State	RI
Zip	02915	Zip	02915
Secretary Name	Timothy E. Woodward	Treasurer Name	Timothy E. Woodward
Street Address	30 Sachem Road	Street Address	30 Sachem Road
City	East Prov.	City	East Prov.
State	RI	State	RI
Zip	02915	Zip	02915

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name	Timothy E. Woodward	Director Name	
Street Address	30 Sachem Road	Street Address	
City	East Prov.	City	
State	RI	State	
Zip	02915	Zip	
Director Name		Director Name	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	Common	No Par Value	100	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date: 7/29/97
Check No.: 91859189220

By: _____

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.

Timothy E. Woodward 7-28-97
Signature of Officer Date

Timothy E. Woodward
Print or Type Name of Officer

President
Title of Officer