



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:

2021

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

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R.I. DEPT. OF STATE
BUS SVCS DIV

2021 FEB 11 AM 12

1. Entity ID Number 36938		2. Exact name of the Corporation ESCAPE 'E' ROCK 'N ROLL REVUE, INC.				
3. Principal Office Address 84 LITTLEFIELD STREET			City PAWTUCKET	State RI	Zip 02861	
4. NAICS Code 711410		6. Brief description of the character of business conducted in Rhode Island PROFESSIONAL MUSICAL ENTERTAINMENT SERVICES				
5. State of Incorporation RHODE ISLAND						
7. List ALL officers (names and addresses)					Check the box to indicate an attachment ☐	
President Name EDMUND F. BROADLEY III			Vice-President Name VACANT			
Street Address P. O. BOX 712			Street Address			
City PAWTUCKET	State RI	Zip 02862	City	State	Zip	
Secretary Name SAME			Treasurer Name SAME			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. List ALL directors (names and addresses)					Check the box to indicate an attachment ☐	
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				
This information is currently of record in the Department of State. Changes require an additional filing.		Check the box to indicate an attachment ☐				
		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE
		3(X)				NO 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 EDMUND F. BROADLEY III				Date 02/04/2021		
Signature of Authorized Representative 				FILED		

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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FORM 630 - Revised: 08/2020