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.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2021 FEB 26 A 11:44

1. Entity ID Number	2. Exact name of the Corporation
000088065	EDGEWOOD LAUNDRY, INC.

3. Principal Office Address	City	State	Zip
1980 BROAD STREET	CRANSTON	RI	02905

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
812320	RETAIL AND WHOLESALE LAUNDERING, DRY CLEANING, AND RENOVATING WEARING APPAREL
5. State of Incorporation	
RHODE ISLAND	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Street Address	City	State	Zip
DENNIS R. RENZI, SR.	35 HINES FARM ROAD	CRANSTON	RI	02921

Vice-President Name	Street Address	City	State	Zip
DENNIS R. RENZI, SR.	35 HINES FARM ROAD	CRANSTON	RI	02921

Secretary Name	Street Address	City	State	Zip
DARREN J. RENZI	281 CHESTNUT STREET	WARWICK	RI	02888

Treasurer Name	Street Address	City	State	Zip
JUDY A. RENZI	35 HINES FARM ROAD	CRANSTON	RI	02921

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Street Address	City	State	Zip
DENNIS R. RENZI, SR.	35 HINES FARM ROAD	CRANSTON	RI	02921

Director Name	Street Address	City	State	Zip

9. Shares Authorized

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100	COMMON	NO PAR

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	Date
DENNIS R. RENZI, SR. PRESIDENT	2-26-21

Signature of Authorized Representative: Dennis R. Renzi Sr.

FILED
FEB 26 2021 11:44
BY CICOOY

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

FORM 630 - Revised: 08/2020