



State of Rhode Island and Providence Plantations  
**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.

FILED  
 APR 21 2021  
 BY 5/24/21 DS

1. Entity ID Number <b>116317</b>		2. Exact name of the Corporation <b>Mahoney's Scrap Metal, Inc.</b>	
3. Principal Office Address <b>300 Front Street</b>		City <b>Lincoln</b>	State <b>RI</b>
		Zip <b>02865</b>	
4. NAICS Code <b>42 - Wholesale Trade</b>	6. Brief description of the character of business conducted in Rhode Island <b>Sale of scrap metal.</b>		
5. State of Incorporation <b>Rhode Island</b>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>Darrel A. Davidow</b>		Vice-President Name <b>Alexander F. Davidow</b>	
Street Address <b>19 Amber Lane</b>		Street Address <b>506 Newman Avenue</b>	
City <b>Attleboro</b>	State <b>MA</b>	Zip <b>02703</b>	City <b>Seekonk</b>
		State <b>MA</b>	Zip <b>02771</b>
Secretary Name <b>Betty L. Davidow</b>		Treasurer Name <b>Betty L. Davidow</b>	
Street Address <b>506 Newman Avenue</b>		Street Address <b>506 Newman Avenue</b>	
City <b>Seekonk</b>	State <b>MA</b>	Zip <b>02771</b>	City <b>Seekonk</b>
		State <b>MA</b>	Zip <b>02771</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>Alexander F. Davidow</b>		Director Name <b>Betty L. Davidow</b>	
Street Address <b>506 Newman Avenue</b>		Street Address <b>506 Newman Avenue</b>	
City <b>Seekonk</b>	State <b>MA</b>	Zip <b>02771</b>	City <b>Seekonk</b>
		State <b>MA</b>	Zip <b>02771</b>
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES	CLASS/SERIES
		<b>2000</b>	<b>Common</b>
			<b>No Par Value</b>
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 <b>Darrel A. Davidow, President</b>			Date <b>4/15/21</b>
Signature of Authorized Representative <i>Darrel A. Davidow</i>			SIGN DOCUMENT HERE