



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

2025
MAR 05 10:26:37

1. Entity ID Number 001704909		2. Exact name of the Corporation Everyday Wellness @ Eliza Williams Inc.			
3. Principal Office Address 3 Regency Plaza, Unit 2			City Providence	State RI	Zip 02903
4. NAICS Code 812199		6. Brief description of the character of business conducted in Rhode Island A spa offering relaxing, rejuvenating and therapeutic treatments.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Megan I Wansing			Vice-President Name		
Street Address 3 Regency Plaza, Unit 2			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Secretary Name Megan I Wansing			Treasurer Name Megan I Wansing		
Street Address 3 Regency Plaza, Unit 2			Street Address 3 Regency Plaza, Unit 2		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
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					
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 <input type="checkbox"/>		
			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 Megan I Wansing, President					Date 2/20/2025
Signature of Authorized Representative 					

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