RI SOS Filing I	Number: 2024	453934310	Date: 4/26/2024 4:00	:00 PM			
State of Rhode Islam Department of St Annual Report for the year: Corporation Filling period: February 1 - Filling Fee: \$50.00 Penalty: Additional \$25.00 to	ate - Busines 2024 May 1 fee if form is not	filed by May 31.	Pivision FILED,				
1. Entity ID Number 80332	2. Exact name of A Wheels		W				
3. Principal Office Address 648 Killingly Street			City Johnston	State RI	Zip 02919		
4. NAICS Code 811111 5. State of Incorporation Rhode Island	Brief description of the character of business conducted in Rhode Island The sale and repair of new and used automobiles.						
7. List ALL officers (names and add				k the box to indicate an	attachment		
John J. Gosselin			Vice-President Name John J. Gosselin				
Street Address 648 Killingly Street			Street Address 648 Killingly Street				
City Johnston	State RI	^{Zip} 02919	City Johnston	State RI	^{Zip} 02919		
Secretary Name John J. Gosselin			Treasurer Name John J. Gosselin				
Street Address same as above			Street Address same as above				
City	State	Zip	City	State	Zip		
8. List ALL directors (names and a	ddresses)	 	Chec	k the box to indicate an	attachment		
John J. Gosseli	in		Director Name	·-			
Street Address			Street Address				

Street Address same as above				Street Address					
Dity	State	Zip	City	City		Zip	-		
Director Name			Director Name						
Street Address	-	Street Address							
Dity	State	Zip	City	City		Zip	-		
). Shares Authorized		10. Share	10. Shares Issued C		heck the box to indicate an attachment				
his information is currently of record in the Department of State. Changes require an additional filing.		NUMB	NUMBER OF SHARES CLASS			S/SFRIFS PAR VALUE			
		1,000		common		no par value			
1. This report must be exercise or trustee, this report in the report of perjury statements, and that all lame of Authorized Repr	ort must be executed o y, I declare and affirm statements containe	n behalf of the c that I have exa	orporation by the mined this repo	receiver or trustee.			_		
John J. Gosselin,			4/18/2		18/2014				
Signature of Authorized R	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