



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 101430		2. Name of Corporation Courtesy Auto Sales, Inc.			
3. Street Address Principal Business Office 1129 W. Shore Rd			City Warwick	State RI	Zip 02889
4. Business Phone No. 401-732-7711		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island THE SALE OF MOTOR VEHICLES.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Brian Curtin			Vice President Name Antonio Duran		
Street Address 82 Sunflower Circle			Street Address 188 Oak St		
City N. Providence	State RI	Zip 02829	City Swansea	State MA	Zip 02777
Secretary Name Brian Curtin			Treasurer Name Antonio Duran		
Street Address 82 Sunflower Circle			Street Address 188 Oak St		
City N. Providence	State RI	Zip 02829	City Swansea	State MA	Zip 02777
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Brian Curtin			Director Name Antonio Duran		
Street Address 82 Circle Circle			Street Address 188 Oak St		
City N. Providence	State RI	Zip 02829	City Swansea	State MA	Zip 02777
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			100	Common	no par value
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

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.



FILED
File Date
Check No. **OCT 05 2007**
By: **1869**
FOR SECRETARY OF STATE USE ONLY

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.

Signature **Antonio Duran** Date **2/26/07**
Print or Type Name
Vice-President / Treasurer
Title