

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.

	a subject to a penany				
1. Corporate ID No. 7 2. Name of Corporation WALSH'S AUTO BUDY & SACES, INC					
3. Street Address Principal Business Office 60 NARRAGAN SEH AW			Providence	State R (2ip 02907
4. Business Phone No. 5. State of Incorporation					
401-785-3560 RI					
6. Brief Description of the Character of Business Conducted in Rhode Island					
AUTO BOOY A AUTO S'ALE'S 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name			Vice President Name		
Kim WALSH			MARK WALSH		
Kim WALSH Street Address			Stroot Address		
58 Pheasant Dr			243 GLACE ST		
City	State R /	Zip 02920	CRANSTON	State	Zip
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Street Address 58 Pheasant Dr City Cranshon R1 02920			Treasurer Name MANK WA(SH		
Street Address			Street 4 diame		
58 Pheasant Dr			State RI 21p 02910		
City	State	Zip 0252 い	City	State	Zip
8 NAMES AND ADDRESSES	/ጚ/ OF THE DIRECTOR		CACHERUT D DITT THE	C1	07910
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name					
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Street Address			Street Address		
City	State	Zip	City	State	Zip
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Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED A	 "X" ROX FOR ATTA	 CHMENT) □	10 CHARDS TOSTION -	Z POT ZON AND A	
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
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			雪城(4) 名名(4)		
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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.					
and the property of the proper	on condit of the corp	oration by the receiver t	or trustee.		
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Under penalty of perjury, I declare and affirm that I have examined the including any accompanying schedules and statements, and that all st					
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Roj	U4' ===		Print or Type Name Pa Esident		
Dy			■ President		
FOR SECRETARY OF ST.		Title		·	
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