

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222.3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* 2008

5797 Street Address Principal Busine	D &	1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescience of Corporation  2. Name of Corporation  D. & M. MOTOR SALES, INC.				
178 PHENIX  Business Phone No.	AVENUE		CRANSTON	State RI	<sup>Zip</sup> 02920	
943-2050		5. State of Incorporati R T	on		02920	
Brief Description of the Charact	er of Business Conduc	<u></u>				
TO DUV & St	PII amtom	^b-il~~ c	r vehicles at re	tail & wholes	7010	
esident Name	es of THE Othic	ERS: ("X" BOX FOR A	TACALAGE IN SPA	CES/BEFORE LISTNE ATT	Date	
NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATT.  Michael J. Notarianni						
reet Address			Thomas Nota	<u>rianni</u>		
202 Randall	Street	·	Street Address	-		
Cranston	State R I	02920	Cranston	State R I	<sup>Zip</sup> 02920	
retary Name David Notari	omm ř	······································	Treasurer Name	······································	.1	
eet Address	Lannı		Thomas Notarianni			
15 Rotondo Avenue			Street Address 80 Burton Street			
, Cranston	State R I	02920	City	State	Zip	
		TORS: ("E" ROY FOR A	Cranston	RI	02920	
ector Name			Director Name	ACES BEFORE USING AT	TACHMENTS	
æt Address			Street Address			
	State	Zip				
		Ση	City	State	Zip	
ector Name			Director Name			
et Address						
n nauress			Street Address			
	State	Zψ	CH) <sup>*</sup>	State	Zip	
SHARES AUTHORIZED (	 ("X" BOX FOR A:	 ITACHMENT) [	10. SHARES ISSUED ("X	" BOX FOR ATTACHME.	 M20 □	
THORIZED SHARES			ISSUED SHARES — THIS SECTION	MUST BE COMPLETED		
nber of Shares	Class/Series	Far Value	Number of Shares	Class/Series	Pur Value	
600	No par va	lue	600	No Par Val	le .	
			Editor Handler Control			
s report must be executed	on behalf of the	corporation by an authori	zed representative. If the corpor	ration is in the hands of a	racaivar on t	
report must be executed	on behalf of the c	orporation by the receive	r or trustee.	ation is in the halles of a	receiver or trus	

File Date	FILED."	
Check No.	APR 07 2008	
Ву:	By 1214612	445
	FOR SECRETARY OF STATE USE ONLY	

including any accompanying schedules and statements, and that all statements contained herein are true and correct.

3-31-08 AMINITOTOPP Date

David Notarianni

Print or Type Name

Secretary