



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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 2008

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. 66008		2. Name of Corporation J&H AUTOMOTIVE SERVICE CENTER, INC.			
3. Street Address Principal Business Office 100 BROWNLEE BOULEVARD			City WARWICK	State RI	Zip 02886
4. Business Phone No. 401 739 7710		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island AUTOMOBILE REPAIR AND SERVICE					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Henry F. DiPietro			Vice President Name John J. Curran		
Street Address 14 Clover Drive			Street Address 3595 Post Road		
City Coventry	State RI	Zip 02816	City Warwick	State RI	Zip 02886
Secretary Name John J. Curran			Treasurer Name Henry F. DiPietro		
Street Address 3595 Post Road			Street Address 14 Clover Drive		
City Warwick	State RI	Zip 02886	City Coventry	State RI	Zip 02816
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
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 ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
4,0000	COMMON NO PAR VALUE		400	COMMON	No Par
			THIS SECTION MUST BE COMPLETED		

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.

Henry F. DiPietro
Signature _____ Date _____

Henry F. DiPietro

Print or Type Name

President

Title

File Date **FILED**
Check No. **AUG 25 2008**
By: *4011*
By FOR SECRETARY OF STATE USE ONLY