



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. 97004		2. Name of Corporation Rhode Island Service Station Inc	
3. Street Address Principal Business Office 953 Broad Street		City Providence	State RI
4. Business Phone No. 401-461-9218		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island To engage auto repair			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Oscar Rodriguez		Vice President Name Ana Batista	
Street Address 225 Norwood Avenue		Street Address 225 Norwood Ave	
City Cranston		City Cranston	
State RI		State RI	
Zip 02905		Zip 02905	
Secretary Name Ana Batista		Treasurer Name Oscar Rodriguez	
Street Address 225 Norwood Ave		Street Address 225 Norwood Ave	
City Cranston		City Cranston	
State RI		State RI	
Zip 02905		Zip 02905	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Oscar Rodriguez		Director Name Ana Batista	
Street Address 225 Norwood Ave		Street Address 225 Norwood Ave	
City Cranston		City Cranston	
State RI		State RI	
Zip 02905		Zip 02905	
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
2500	Common		
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares	Class/Series	Par Value	
none			

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 SECRETARY OF STATE
 CORPORATIONS DIV
 2008 AUG 27 PM 2:49

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.

2:49

FILED

File Date AUG 27 2008

Check No. _____

By: [Signature]

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 Ana Batista Date 8-27-08

Print or Type Name Ana Batista

Title Vice President