

1. Corporate ID No. 120617

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222,3040

2. Name of Corporation
RICHMOND MOTOR SALES, INC.

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_ 2009

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.

### April 24-4700   Rhode Island  ### April Basilway	3. Street Address Principal Business Office 700 North Main St.			Providence	State RI	24p 02904
To sell, rent, lease or tow motor vehicles  To MARES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)	401-421-4700 Rhode Island					
Angela Badway  Providence Rhode Island  Angela Badway  Providence Rhode Island  Angela Badway  Angela Badway  Providence Rhode Island  Angela Badway  Angela Badway  Providence Rhode Island  Angela Badway  Angela Badw	6. Brief Description of the Character To sell, rent, lease or tow m	of Business Conducted in notor vehicles	Rhode Island			
Angela Badway  Street Address  TOO North Main St.  TOO North Main	7. NAMES AND ADDRESSES	OF THE OFFICERS	: ("X" BOX FOR ATTA	CHMENT) 🔲 FILL IN S	SPACES BEFORE USING A	TTACHMENTS
Mode Address   Mode Island	President Name			•		
700 North Main St.  700 No	Angela Badway			: Angela Badway		
Providence Rhode Island 02904 Providence Rhode Island 02904  Served Address Same as above Same as ab	Street Address 700 North Main St.					
Same as above    Street Additives   Street Additive						71p 02904
Same as above    City	Secretary Name Betty Ann Palmisciano					
Providence   Rhode Island   02904   same as above   same as ab	Street Address 700 North Main St.			•		
Director Name   Director Name   Street Address   Street	Providence		<sup>Zip</sup> 02904	•		
Director Name   Director Name	Director Name					
Director Name    Director Name	Sirvet Address			Street Address		
Sirvet Address  Sirvet Address  Sirvet Address  Sirvet Address  City  State  Zip  10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION MUST BE COMPLETED  Number of Shares  Class/Series  Far value  State. Changes require an additional filing. See Section 9 of instruction sheet.  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 repoincluding any accompanying schedules and statements, and that all statement contained herein are true and correct.  The Date  Angela Badway  Print or Type Name  President  Title  President  Title	City	State	Zip	City	State	Zip
Shares Authorized  10. Shares Issued ("X" BOX FOR ATTACHMENT)  Issued Shares — This section Must be completed  This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.  150  Common  no 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.  Under penalty of perjury, I declare and affirm that I have examined 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 statement contained herein age true and correct.  Signature  Angela Badway  Print or Type Name  President  Title	Director Name			Director Name		
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