

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

Form 630 Rev. 08/08

* 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(e&d)) is

subject to a penalty fee of \$25.00.					
1. Corporate ID No. 14760	2. Name of Corporation NEMO	ENTERDA	21500		
3. Street Address Principal Business		CHIERPI		State	Zíp
1400 CTANS		-	CrAnston	RI	0.5850
4. Business Phone No.		5. State of Incorporation			
6. Brief Description of the Character of Business Conducted in Rhode Island					
6. Brief Description of the Character Auto SALES	of Business Conducted in I + Service	Rhode Island			
7. NAMES AND ADDRESSES		("X" ROX FOR ATTA	CHMENT) □ FILL IN SPA	CES REFORE USING	ATTACHMENTS
President Name			Vice President Name		
VINCENT QUOIR I			VINCENT & VOIR		
Street Address			9 Sherwood LANE		
45 JOY ST	State	Zip	: City	State	
JOHNSTON	PI	02919	Greenville	RI	07858
Secretary Name			VINCENT & VOIPE		
Street Address			Street Address		
15 Joy ST			9 Sterwood LAME		
City	State (2.T	02919	Greenul	T	Zip 02828
S. NAMES AND ADDRESSES	1	1	. —	PACES BEFORE USING	1
Director Name		(11 2011 1011 1111	• • •		
VINCENT R VOIDE I			UNCENT R VOIPS		
Street Address			Street Address		
25 Joy ST		Tau		od by	23 /
JOHNS TON	State LZ I	6 2919	Greenville	State 2	2828 2828
Director Name			Director Name		
			on		
Street Address			Street Address		
City	State	Zip	City	State	249
			:		
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
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.					
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			1		
This report must be executed this report must be executed				poration is in the hands	of a receiver or trustee,
una report must be executed	on benan or the corp	oration by the receiver t	or date.		
			Under penalty of peri	urv I decla ≜ and affirm th	nat I have examined this repor
		_			tements, and that all statement
	Cli Pro		contained herein are t		
File Date	LIFD		<u> </u>	11/	12-24-08
] JA	N 1 5 2005		Signature		Date
Check No.	2009		VINCE.	47 K	101 pp
By:	7815-1 10	1460	Print or Type Name		
	THE LIGHT ONLY	'	1 Pes		
FOR SECRETARY OF ST	ALE USE ONLY	1			