



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

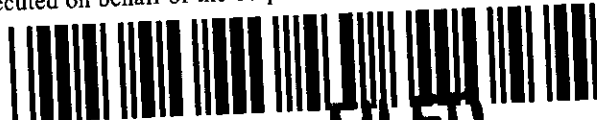
Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

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.

1. Corporate ID No. 123572		2. Name of Corporation ALFREDO'S AUTO BODY & SALES, INC.		
3. Street Address Principal Business Office 1 Peter Road		City Bristol	State RI	Zip 02809
4. Business Phone No. (401) 352-3399		5. State of Incorporation RHODE ISLAND		
6. Brief Description of the Character of Business Conducted in Rhode Island THE SALE AND REPAIR OF AUTOMOBILES, TRUCKS				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Alfredo Severino		Vice President Name None		
Street Address 20 Columbus Street		Street Address		
City Providence	State RI	Zip 02908	City	State
Secretary Name Josephine Severino		Treasurer Name Alfredo Severino		
Street Address 20 Columbus Street		Street Address Same as above		
City Providence	State RI	Zip 02908	City	State
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name NONE		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
Number of Shares		ISSUED SHARES — THIS SECTION MUST BE COMPLETED		Par Value
Class/Series		Number of Shares	Class/Series	Par Value
Par Value		1,000	Common	No Par
1,000 COMM 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.



FILED

FEB 18 2009

SI-6-11 18 PM 3-15 2009 FEB 18 PM 3-15 2009 *123572*

File Date

Check No.

By: **AMF**

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 state contained herein are true and correct.

Alfredo Severino
Signature Date

ALFREDO SEVERINO
Print or Type Name

President
Title