



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 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. 21341		2. Name of Corporation J & M AUTO ELECTRIC CO., INC.			
3. Street Address Principal Business Office 163 Liberty Street			City Central Falls	State RI	Zip 02863
4. Business Phone No. 724-7030		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island REBUILD STARTERS AND ALTERNATORS ON AUTOMOBILES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Unoccupied due to death			Vice President Name Emanuel LaScola		
Street Address			Street Address 83 Ashburne Street		
City	State	Zip	City	State	Zip
			Pawtucket	RI	02860
Secretary Name Emanuel LaScola			Treasurer Name Unoccupied due to death		
Street Address 83 Ashburne Street			Street Address		
City	State	Zip	City	State	Zip
Pawtucket	RI	02860			
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Emanuel LaScola			Director Name		
Street Address 83 Ashburne Street			Street Address		
City	State	Zip	City	State	Zip
Pawtucket	RI	02860			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			200	COMMON	NO PAR

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.

File Date	4-6-09
Check No.	758
By:	MNC
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.

2009 APR -6 AM 11:42
RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

Signature
Emanuel LaScola
Print or Type Name
Vice-President
Title

March 31, 2009
Date

Form 630 Rev. 08/08