

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

Form 630 Rev. 08/08

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(codd)) is

subject to a penalty fee of \$25.00.	,					
1. Corporate ID No. 000033335	1					
3. Street Address Principal Business Office 264 Weeden Street			^{City} Pawtucket	State RI	^{Zip} 02860	
4. Business Phone No. 5. State of Incorporation Rhode Island						
6. Brief Description of the Character of Business Conducted in Rhode Island auto sales and repairs						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Jack S. Francisco			Vice President Name Jack S. Francisco			
Street Address 140 1/2 Coyle Avenue			Street Address 140 1/2 Coyle Avenue			
City Pawtucket	State RI	^{Ζip} 02861	<i>City</i> Pawtucket	State RI	^{Zip} 0 2 861	
Secretary Name Jack S. Francisco			Treasurer Name Jack S. Francisco			
Street Address 140 1/2 Coyle Avenue			Street Address 140 1/2 Coyle Avenue			
City Pawtucket	State RI	^{Zip} 02861	^{City} Pawtucket	State RI	^{Zip} 02861	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name Jack S. Francisco			ACHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Director Name none			
Street Address 140 1/2 Coyle Avenue			Street Address none			
City Pawtucket	State RI	<i>Հւթ</i> 02861	City none	State none	nonge	
none			Director Name none			
Street Address none			Street Address none			
City none	State none	շւր none	City none	State NON®	none V	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) S 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.			Number of Shares	Class/Series	Par Value	
			100	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, including any accompanying schedules and statements, and that all statements
File Date	contained herein are true and correct 120 1 100 100 120 4/6/09
Check No. APR 0.0 2000	Jack S. Francisco
By: By (6(1))	Print or Type Name
FOR SECRETARY OF STATE USE CHEX	President Title
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