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State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of Stat
Corporations Divisio
148 W. River Stree
Providence, RI 02904-261
401.222.304

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.	2. Name of Corporation
145967	Heico Sportiv North America, Inc.

3. Street Address Principal Business Office	City	State	Zip
One Ship Street	Providence	RI	02903

4. Business Phone No.	5. State of Incorporation
	Rhode Island

6. Brief Description of the Character of Business Conducted in Rhode Island
To warehouse, sell and distribute automotive parts and accessories.

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
Lawrence T. Henderson	One Ship Street	Providence	RI	02903

Vice President Name	Street Address	City	State	Zip
Charles M. Henderson	One Ship Street	Providence	RI	02903

Secretary Name	Street Address	City	State	Zip
Lawrence T. Henderson	One Ship Street	Providence	RI	02903

Treasurer Name	Street Address	City	State	Zip
Charles M. Henderson	One Ship Street	Providence	RI	02903

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
Lawrence T. Henderson	same as above			

Director Name	Street Address	City	State	Zip
Charles M. Henderson	same as above			

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
190	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.

[redacted] [redacted]

Under penalty of perjury, I declare and affirm that I have examined this repor including any accompanying schedules and statements, and that all statemen contained herein are true and correct.

Signature 4/22/09 *Date*

Lawrence T. Henderson
Print or Type Name

[redacted] President

FILED
File Date JUN 02 2009
Check No.
By: By 11844 10742

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