



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

A. Ralph Melillo, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2515
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(c), 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)(4)) is subject to a penalty fee of \$25.00.

1. Corporation ID No. 5936		2. Name of Corporation D'Agostino's Auto Sales + Salvage Inc	
3. Street Address Principal Business Office 75 Ellen Field St.		City Providence	State RI
4. Business Phone No. 401-461-4200		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island Sale of Autos, Parts, Repairs and any Legal Business			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Dolores D'Agostino		Vice President Name	
Street Address 400 NARR PKWY NB5		Street Address	
City Warwick	State RI	Zip 02888	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Dolores D'Agostino		Director Name	
Street Address 400 NARR PKWY NB5		Street Address	
City Warwick	State RI	Zip 02888	
Director Name		Director Name	
Street Address		Street Address	
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 MUST BE COMPLETED	
		Number of Shares 100	Character Com
			Par Value NUPAR

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 1/06/09	3:50 PM
Check No. Transaction ID#	
By: KMC 567354	
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.

Dolores D'Agostino 6-3-09
Signature Date
Dolores D'Agostino
Print or Type Name
Pres
Title