



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. 156825		2. Name of Corporation COLOMBIA AUTO SERVICE CORP.			
3. Street Address Principal Business Office 1160 WESTMINSTER ST.		City PROVIDENCE	State RI	Zip 02909	
4. Business Phone No.		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ELIZABETH ESQUIAQUI		Vice President Name GREGORY BLANCHARD			
Street Address 55 MILTON AVE		Street Address SAME			
City N. SMITHFIELD	State RI	Zip 02896	City	State	
Secretary Name		Treasurer Name ELIZABETH ESQUIAQUI			
Street Address		Street Address SAME			
City	State	Zip	City	State	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name		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) ☐		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐			
AUTHORIZED SHARES		ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000	COMMON	0	NONE	COMMON	0

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	FILED
Check No.	AUG 24 2009
By	1420
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.

Elizabeth Esquiaqui 8/21/09
Signature Date
ELIZABETH ESQUIAQUI
Print or Type Name
PRES.
Title