

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

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(cord.)) is subject to a penalty fee of \$25.00.

31876		2. Name of Corporation providence auto engineering co, inc				
3. Street Address Principal Business Office 773 broad st			providence	RI	02907	
4. Business Phone No. 401-941-0300  5. State of Incorporation Rhode Island						
	Character of Business Conduc RESSES OF THE OFFICE	ted in Rhode Island  CERS: ("X" BOX FOR ATTA	CHMENT)  FILL IN Vice President Name Lee Pelletier	SPACES BEFORE USING	ATTACHMENTS	
Street Address 209 Katelyn Court			Street Address 10 Osprey Dr			
<sup>ity</sup> Varwick	State RI	<sup>Zip</sup> 02886	City Coventry	State RI	<sup>Ζφ</sup> 02816	
Secretury Name Lee Pelletier			Treasurer Name Roger Pelletier			
Street Address 10 Osprey Dr			Street Address 209 Katelyn Court			
Coventry	State RI	<sup>Zip</sup> 02816	City Warwick	State RI	<i>Ζі</i> ρ <b>02886</b>	
, NAMES AND ADD irrector Name	RESSES OF THE DIRE	CTORS: ("X" BOX FOR AT	ACHMENT) TELL I	IN SPACES BEFORE USIN	IG ATTACHMENTS	
Street Address			Street Address			
üţγ	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
îity	State	Ζіф	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	
			600		no par	
mstruction sheet.			200	common	no par	
this report must be e	ED	he corporation by an authoriz le corporation by the receiver	or trustee.  Under penalty o including any ac	f perjury, I declare and affirm scompanying schedules and so are true and correct	n that I have examined this restatements, and that all statem	
By: By	UIdI		President	,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
FOR SECRETA	ARY OF STATE USE ONLY		Title			