

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

401.222,30

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.1. 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(e&d)) is subsect to a smaller for all \$23.00 subject to a penalty fee of \$25.00.

1 Corporate ID No. 120617	2. Name of Corporation RICHMOND MOTOR SALES, INC.				
3. Street Address Principal Business Office 700 North Main Street			Providence	State Rhode Island	Zip 02904
4. Business Phone No. 401-421-4700 5. State of Incorporation Rhode Island					
6. Brief Description of the Character of To sell, rent, lease or tow more names and Addresses	otor vehicles		CHMENT) □ FILL IN SP	ACES BEFORE USING AT	TACHMENTS
Angela Badway			Vice President Name Angela Badway		
Street Address 700 North Main Street			Street Address 700 North Main Street		
Providence	State Rhode Island	^{Ζίρ} 02904	City Providence	State Rhode Island	^{Zip} 02904
Betty Ann Palmisciano			Treasurer Name same as above		
Street Address 700 North Main Street			Street Address same as above		
Providence	Rhode Island	^{Ζiμ} 02904	same as above	same as above	zip same as above
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name None			TACHMENT) THE IN SPACES BEFORE USING ATTACHMENTS Director Name		
treet Address			Street Address		
City	State	Zip	City	State	Zip
Director Name	***************************************		Director Name		
Street Address			Street Address		
CHy	State	Zip	City	State	Zip
9. SHARES AUTHORIZED	I	·	: 10. SHARES ISSUED ("X" BOX FOR ATTACHM! ION <u>MUST</u> BE COMPLETED	ENT)
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.			Niew er of Statres	Class/Sortes	Par Vatue
			150	common	no par value
This report must be executed to his report must be executed to	on behalf of the corpor behalf of the corpor	poration by an authorize oration by the receiver o	d representative. If the corpor trustee.	poration is in the hands of	a receiver or trustee.
This report must be executed of this report must be executed or	on behalf of the corporate of the corpor	poration by an authorize oration by the receiver o	or trustee. Under penalty of perj	ury, I declare and af firm that	I have examined this report,
File DateFILE	D	poration by an authorize oration by the receiver of	or trustee. Under penalty of perj	ury, I declare and affirm that panying scheduly, and statem	I have examined this report, onts, and that all statements
File DateJAN 22 2	D	poration by an authorize oration by the receiver o	or trustee. Under penalty of perjorded including any accomp	ury, I declare and affirm that panying schedules and statem rue and correct	I have examined this report, onts, and that all statements
File DateFILE	D	poration by an authorize oration by the receiver o	Under penalty of perjincluding any accompand herein are significant.	ury, I declare and affirm that panying schedules and statem rue and correct	I have examined this report, onts, and that all statements