

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

Form 630 Rev. 08/08

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(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(cod)) is

subject to a penalty fee of \$25.						
1. Corporate ID No. 54397	2. Name of Corpor O11 & G	rease On Wheel	s, Inc.			
3. Street Address Principal Business Office 154 Fletcher Avenue			Cranston	State RI	^{Zip} 02920	
4. Business Phone No. 5. State of Incorporation						
(401) 942-3715 Rhode Islan			nd			
6. Brief Description of the Cha		ed in Rhode Island				
	B	ERS: ("X" BOX FOR ATTA	CHMENT) FILL IN S	SPACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Steven I. Dinerman			Paul M. Dinerman			
Street Address			Street Address			
22 West Hamden Road			153 Summit Drive			
City	State	Zip	City	RI	02920	
Cranston	RI	02920	Cranston		1.02.2.2.0	
Secretary Name			Treasurer Name	Steven I. Dinerman		
Paul M. Dinerman			Street Address			
Street Address	` ·-		22 West Hamden Road			
153 Summit I				State	Zip	
City	State	Zip	City		02920	
Cranston	RI	02920	Cranston	RI		
	ESSES OF THE DIREC	CTORS: ("X" BOX FOR AT	: Director Name	SPACES BEFORE USI	AND THE REPORTED TO	
Director Name			Paul M. Dinerman			
Steven I. Dinerman			Street Address			
Street Address			153 Summit Drive			
22 West Hai			: 155 Summi	State	Ζίρ	
City	State	Zip	; *	RI	02920	
Cranston	RI	02920	: Cranston : Director Name	t		
Director Name			Director rume			
		<u>.,,</u>	Street Address		<u>, , , , , , , , , , , , , , , , , , , </u>	
Street Address						
City	State	Zip	City	State	Zip	
i		İ		CEVE POV FOR ATTA	CHMENT) [
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
					Par Value	
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.			Number of Shares	Class/Series	Par value	
			None			
			110110			
This report must be ex	secuted on behalf of th	ne corporation by an authoriz	zed representative. If the	corporation is in the ha	nds of a receiver or trustee,	
this report must be ex	ecuted on behalf of the	e corporation by the receive	r or trustee.	٨		
			\mathcal{U}	/\		
			// //	\		
			Under penalty of	beriury. I declare and affir	m that I have examined this re	
			including any ad	companying schedules and	statements, and that all statem	
			contained herein	are thug and correct.		
1. 14	-2-2010	/	John 1	y W human	2/1/20/0	
File Date	0010		Signature		Dale	
Chart No.	X444		_			
Check No.	000	,	Steven I. Dinerman			
Ву:	Imne	<u>_</u>	Print or Type Nan	ne		
1			Presider	nt		
FOR SECRETAL	RY OF STATE USE ONLY	"	Title			