



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 02904-2611
401.222.3011

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

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

1. Corporate ID No. 164823		2. Name of Corporation Route 117 Gas & Carwash, Inc.		
3. Street Address Principal Business Office 1710 West Shore Road		City Warwick	State RI	Zip 02889
4. Business Phone No. (401) 737-2888		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Gas Station, Convenient Store and Car Wash				

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Barry Fishback			Vice President Name Robert Silverman		
Street Address 11 Chestnut Street			Street Address 12 Avon Avenue		
City North Providence	State RI	Zip 02904	City Warwick	State RI	Zip 02889
Secretary Name Barry Fishback			Treasurer Name Robert Silverman		
Street Address 11 Chestnut Street			Street Address 12 Avon Avenue		
City North Providence	State RI	Zip 02904	City Warwick	State RI	Zip 02889

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	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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
100	Common	None

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

2-16-2010

Check No.

16255

By:

DS

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.

Signature

Barry Fishback

Print or Type Name

President

Title

Date

2-8-10