

**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

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**Business Corporation
Annual Report**

Filing Period: January 1 - March 1



Help with this form

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.

ANNUAL REPORT YEAR: 2010**1. Corporate ID No.** 000040664**2. Name of Corporation** DAVE'S TOWING SERVICE, INC.**3. Street Address Principal Business Office:**

No. and Street: 119 PLEASANT VIEW AVENUE

City or Town: SMITHFIELD

State: RI

Zip: 02917

Country: USA

4. Business Phone No.

401-231-5359

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

TOWING AND ROAD SERVICE AND MINOR MECHANICAL REPAIRS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

FILED
FEB 17 2010
BY 8626

Delete	Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
<input type="checkbox"/>	PRESIDENT V.P. Treas.	VIRGINIA SCHLEMMER-LAVOIE	190 MANN SCHOOL ROAD SMITHFIELD, RI 02917 USA

Select From Below Title: Secretary

First Name: Henri Middle Name: Joseph Last Name: Lavoie Suffix:

Address: 190 Mann School Rd Smithfield State: RI Zip: 02917 Country: Rhode

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
CNP		\$0.00	1,000.00	1,000.00

9. 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.

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: Virginia Lavoie

Business Name: Dave's Towing Service

No. and Street: 119 Pleasant View Ave

City or Town: Smithfield

State: RI Zip: 02917 Country: Rhode

Contact Phone: (401) 331-3359 ext: 1

Contact Email: Henri.Lavoie@AOL

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

Signed this 5 Day of January, 2010 at 11:37:40 AM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By Virginia M. Lavoie
Signature of Authorized Representative of the Corporation

President

FILED
FEB 17 2010
By 40664