

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

401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

401.222.304

Filling Period: January 1 - March 1 • Filling 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(cc*d)) is subject to a paralle for a \$25.00 subject to a penalty fee of \$25.00.

1. Corporate ID No. 7651	Daniel's A	2. Name of Corporation Daniel's Auto Radiator Works, Inc.				
3. Street Address Principal Business Office 669 ROOSEVELT AVENUE			City Pawtucket	State RI	7 <i>ip</i> 02861	
4. Business Phone No. 725-8751 5. State of Incorporation Rhode island						
6. Brief Description of the Cl Automobile Repair			1.VW.	- 100 Maria (1994)	THE STATEMENT	
7. NAMES AND ADDI President Name	RESSES OF THE OFF	ICERS: ("X" BOX FOR ATTA	CHMENT) TILL IN	SPACES BEFORE USING	ATTACHMENTS	
Joanne Needham			Timothy J. Needham			
Street Address 85 Federal Street			Street Address 85 Federal Street			
City Pawtucket	State RI	^{Zip} 02861	ciry Pawtucket	State RI	Zip 02861	
ecretary Name Joanne Needham			Treasurer Name Joanne Needham			
Street Address 85 Federal Street			Street Address 85 Federal Street			
City Pawtucket	State RI	^{Ζψ} 02861	City Pawtucket	State RI	<i>Zip</i> 02861	
8. NAMES AND ADDR Director Name	ESSES OF THE DIR	ECTORS: ("X" BOX FOR AT		N SPACES BEFORE USIN		
None			Director Name None			
Street Address		SANS CALLED SANS	Street Address			
City	State	Zip	Cit ₁ '	State	Zip	
Director Name None			Director Name None			
Street Address	·****	7,0104	Street Address		760-i N.H.i.	
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZ	ZED			*** ("X" BOX FOR ATTAC. ECTION MUST BE COMPLETED		
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	
			8000	Common	No Par Value	
This report must be exe	ecuted on behalf of the	ne corporation by an authorize	d representative. If the	corporation is in the hand	s of a receiver or trustee,	
ins report must be exe	cuted on behalf of th	e corporation by the receiver of	or trustee.			
	~		Under penalty of	perjury, I declare and affirm t	that I have examined this repo	
	HLED		including any acc	ompanying schedules and sta true true and correct.	itements, and that all stateme	
File Date			(henn	Needhan	2/8/10	
Check No.	R 09 2010		Signature	- punan	Date	
By 14500			Joanne Needham			
			Print or Type Name	9		
FOR SECRETARY	OF STATE USE ONLY		President		,	
			Title		Form 630 Rev. 08/08	