



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 02904-261
401.222.304

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(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.

1. Corporate ID No. 145967	2. Name of Corporation Heico Sportiv North America, Inc.			
3. Street Address Principal Business Office One Ship Street		City Providence	State RI	Zip 02903
4. Business Phone No.	5. State of Incorporation Rhode Island			

6. Brief Description of the Character of Business Conducted in Rhode Island
To warehouse, sell and distribute automotive parts and accessories.

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

President Name Lawrence T. Henderson			Vice President Name Charles M. Henderson		
Street Address One Ship Street			Street Address One Ship Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Lawrence T. Henderson			Treasurer Name Charles M. Henderson		
Street Address One Ship Street			Street Address One Ship Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903

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

Director Name Lawrence T. Henderson			Director Name Charles M. Henderson		
Street Address same as above			Street Address same as above		
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
190	Common	No Par

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.

FILED
File Date JUN 03 2010
Check No.
By: <u>By 1226 1/16/10</u>

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.

Lawrence T. Henderson 5-28-10
Signature Date
Lawrence T. Henderson
Print or Type Name
President