

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

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(e)-d) is

subject to a penalty fee of \$25.00.			7			
1. Corporate ID No. 145408	2. Name of Corporation PAVILION AUTO			-		
3. Street Address Principal Business Office 1211 Cranston Street			Cranston	State RI	^{Zip} 02920	
4. Business Phone No. 5. State of Incorporation RHODE ISLAND						
6. Brief Description of the Character of BUYING AND SELLING OF	of Business Conducted in I USED AUTOMOBI	Rhode Island LES AND OTHER MO	TOR VEHICLES OF A	NY KIND AND MAKE		
7. NAMES AND ADDRESSES	OF THE OFFICERS:	"X" BOX FOR ATTA	. –	SPACES BEFORE USING	ATTACHMENTS	
Angelo Moretti			Vice President Name Maria Moretti			
Street Address 37 Nottingham Drive			Street Address 37 Nottingham Drive			
City Hope	State RI	^{Zip} 02831	City Hope	State RI	^{Zip} 02831	
Secretary Name Mario Moretti			Treasurer Name Angelo Moretti			
Street Address 10 High Meadow Court			Street Address 37 Nottingham Drive			
City Cranston	State RI	^{Zip} 02920	City Hope	State RI	<i>хір</i> 02831	
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT	<i>TACHMENT)</i> 🗌 FILL I	IN SPACES BEFORE USIN	G ATTACHMENTS	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
СНу	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED	i	I		 D <i>("X" BOX FOR ATTACE</i> ECTION M <u>UST</u> 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	
			600	Common	No Par Value	
This report must be executed this report must be executed of				corporation is in the hand	s of a receiver or trustee,	
and report must be executed t	on behan of the corp	oration by the receiver	or dusico.			
			Under penalty of	f perjury, I declare and affirm	that I have examined this report	
FILE	. D —	٦	including any ac	companying schedules and sta	atements, and that all statement	
Et. Dut.			contained nerom	are true and correct.	9	
File Date JAN 05	2011		Signufare		January 4, 2011 Date	
Check No.	ne)			MORETTI		
By:	22		Print or Type Name			
FOR SECRETARY OF STA	ATE USE ONLY			PRESIDENT		
			Title			