

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

PROFIT CORPORATION ANNUAL REPORT FOR T Filing Period: January 1-March 1 • Filing Fee: \$50.00

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(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 53957 NORTHEAST TIRE SALES, INC. 3. Street Address Principal Business Office ITI NARRABANSETT EAST 7. Brief Description of the Character of Business Conducted in Rhode Island RHODE ISLAND 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) Street Address R1C KENNETH S. LIDMAN BARRIN RTON Treasurer Name Street Address (SAME AL ABOVE) Street Address City 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) (SAME STATE AS ABOVE) Street Address City City Director Name Director Name Street Address Street Address City State Zip City State 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES AUTHORIZED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 1,000 SHS \$.10 PAR VAL S'AMO_ COHMON (SAne)

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

	* 5 3 9 5 7 *	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and
File Date:	1-500	that all statements contained herein are true and correct.
Check No.:	42346	Signature of Officer Date
By:FOR SECRETARY	OF STATE USE ONLY	Print or Type Name of Officer Title of Officer