RI SOS Filing Number: 201177157030 Date: 04/01/2011 1:24 PM

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

Amended

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(c&d)) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation			
552445	Northeast Auto Rentals Inc			
3. Street Address Principal Business Office		City	State	Zip
21 Humbert Street		North Providence	R.I.	02911
4. Business Phone No.	5. State of Incorporation			
401-437-8444	Rhode Island			

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

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

President Name			Vice President Name		
Toni Ann Salzillo			Toni Ann Salzillo		
Street Address			Street Address		
42 Peck Hill Road			42 Peck Hill Road		
City	State	Zip	City	State	Zip
Johnston	R.I.	02919	Johnston	R.I.	02919
Secretary Name			**Treasurer Name**		
Toni Ann Salzillo			Toni Ann Salzillo		
Street Address			Street Address		
42 Peck Hill Road			42 Peck Hill Road		
City	State	Zip	City	State	Zip
Johnston	R.I.	02919	Johnston	R.I.	02919

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

Director Name			Director Name		
Toni-Ann Salzillo					
Street Address			Street Address		
42 Peck Hill Road					
City	State	Zip	City	State	Zip
Johnston	R.I.	02919			
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
1,000	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.

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[redacted]

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.

[redacted] 3/20/11
Signature *Date*

Toni-Ann Salzillo
Print or Type Name

President
Title

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

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STATE CORPORATIONS DIV
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Form 630 Rev. 08/08

State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

April 01, 2011 1:24 PM

A. RALPH MOLLIS

Secretary of State

60975-2-590375