

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 Filing Period: January 1 - March 1 • Filing Fee: \$50.00° • THIS REPORT MUST BE TYPED OR PE 2012

" In accordance with R.I.G.L. 7-1.2-, subject to a penalty fee of \$25.00.	1501(e), each corporation fo	tiling or refusing to file its an	nual report within thirty (30) days after	the time prescribed by law (h	BLACK INK. P.I.G.L. 7-1.2-1501(c&d)) is
1. Corporate ID No. 2. Name of Corporation A-Towing, Inc.					
3. Street Address Principal Business Office 733 Warren Ave.			E. Providence	State RI	02914
4. Husiness Phone No. 401 434-6		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island  TOWING SERVICES  7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS  President Name  : Vice President Name					TACHMENTS
Thomas A. Rose, Sq.					
Street Address 733 Warren Ave  City East Pravidence State RI 2002914			Street Address		
East Providence	State RI	202914	City	State	Zip
Thomas A. Rose, Se.			Treasurer Name Thomas A. Rose, 54.		
Street Address. Same			Street Address Same		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS  Director Name  Director Name					TTACHMENTS
Street Address			Street Address		
City	State	Zip	City	State	Zψ
Director Name			Director Name		
Street Address			Street Address		
City	State	Zap	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION 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
			100	common	no par value
This report must be executed a	on behalf of the co-	pration by an auch air-			
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.  Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements consumed therein are true and entreet.					
File Date	3 0 <b>2011</b>		Cleans a		12/28/2011
Check No.			Signature Date Thomas A. Rose,		

FILED	Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements
File Date	Signature  Thomas A. Rose, Se.
FOR SECRETARY OF STATE USE ONLY	Print or Type Name  President
ON STATE USE UNLI	Title Form 630 Rev. 08/08