



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 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

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. 7950		2. Name of Corporation Martin & Son Auto Salvage, Inc.			
3. Street Address Principal Business Office Westerly-Bradford Road			City Westerly	State RI	Zip 02891
4. Business Phone No. (401) 596-7768		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Auto salvage, retail and wholesale of used cars and all things incidental thereto					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert E. Martin, Jr.			Vice President Name Barbara L. Martin		
Street Address 16 Anglewood Avenue			Street Address 16 Anglewood Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name Barbara L. Martin			Treasurer Name Barbara L. Martin		
Street Address 16 Anglewood Avenue			Street Address 16 Anglewood Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert E. Martin, Jr.			Director Name Barbara L. Martin		
Street Address 16 Anglewood Avenue			Street Address 16 Anglewood Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			300 Common NPV	Common	NPV

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 contained herein are true and correct.

Barbara L. Martin 02/07/12
Signature Date
BARBARA L. MARTIN
Print or Type Name
VICE-PRES./SEC.
Title

FILED

File Date FEB 21 2012

Check No. BY 38343

By: _____

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