



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.
 Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 54397		2. Exact name of the Corporation Oil & Grease On Wheels, Inc.							
3. Principal office address 154 Fletcher Avenue				City Cranston	State RI	Zip 02920			
4. Business Phone No. (401) 942-3715				5. State of Incorporation RI					
6. Brief description of the character of business conducted in Rhode Island Automobile Repair									
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>									
President Name Steven Dinerman				Vice-President Name Paul Dinerman					
Street Address 22 West Hamden Road				Street Address 153 Summit Dr.					
City Cranston	State RI	Zip 02920		City Cranston	State RI	Zip 02920			
Secretary Name Paul Dinerman				Treasurer Name Steven Dinerman					
Street Address 153 Summit Dr,				Street Address 22 West Hamden Road					
City Cranston	State RI	Zip 02920		City Cranston	State RI	Zip 02920			
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>									
Director Name Steven Dinerman				Director Name Paul Dinerman					
Street Address 22 West Hamden Road				Street Address 153 Summit Dr.					
City Cranston	State RI	Zip 02920		City Cranston	State RI	Zip 02920			
Director Name				Director Name					
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.				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE			
				None					

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.

FILED

File Date

FEB 22 2012

Check No

9340

By:

FOR SECRETARY OF STATE USE ONLY

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.

Steven Dinerman President 2/13/2012
 Signature of Authorized Representative Date

Steven Dinerman President
 Print or Type Name of Authorized Representative