



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. 46011		2. Exact name of the Corporation Mobile Storage, Inc.			
3. Principal office address 81 Pilsudski Street		City Providence	State RI	Zip 02909	
4. Business Phone No. 401-942-1888		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Acquisition, lease and disposition of cargo trailers.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name William E. Hogan, III		Vice-President Name Ryan Hogan			
Street Address 81 Pilsudski Street		Street Address 81 Pilsudski Street			
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
Secretary Name Ryan Hogan		Treasurer Name William E. Hogan, III			
Street Address 81 Pilsudski Street		Street Address 81 Pilsudski Street			
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name William E. Hogan, III		Director Name Ryan Hogan			
Street Address 81 Pilsudski Street		Street Address 81 Pilsudski Street			
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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
			200	Common	\$0.01

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.

File Date

FILED

Check No

FEB 27 2012

By:

By

FOR SECRETARY OF STATE USE ONLY

Form No. 630

Revised: 01/2012

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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.

Signature of Authorized Representative

Date

William E. Hogan, III

Print or Type Name of Authorized Representative