



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

A. Ralph Molis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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. 122265		2. Name of Corporation The Edart Truck Leasing Corporation			
3. Street Address Principal Business Office 3 Barnard Lane, Floor 2, Suites 307 & 308			City Bloomfield	State CT	Zip 06002
4. Business Phone No. 860-986-7145		5. State of Incorporation Connecticut			
6. Brief Description of the Character of Business Conducted in Rhode Island Rental, leasing, and servicing of motor vehicles					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name E. Mark Siegal			Vice President Name Barry L. Siegal		
Street Address 33 Mountain Farms Road			Street Address 251 King Philip Drive		
City West Hartford	State CT	Zip 06117	City West Hartford	State CT	Zip 06117
Secretary Name Barry L. Siegal			Treasurer Name Howard J Siegal		
Street Address 251 King Philip Drive			Street Address 65 Bath Crescent Lane		
City West Hartford	State CT	Zip 06117	City Bloomfield	State CT	Zip 06002
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name E. Mark Siegal			Director Name Barry L Siegal		
Street Address 33 Mountain Farms Road			Street Address 251 King Philip Drive		
City West Hartford	State CT	Zip 06117	City West Hartford	State CT	Zip 06117
Director Name Howard J Siegal			Director Name		
Street Address 65 Bath Crescent Lane			Street Address		
City Bloomfield	State CT	Zip 06002	City	State	Zip
9. SHARES AUTHORIZED 24000 NOPARVALUE			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 <u>MUST</u> BE COMPLETED		
			Number of Shares 1200	Class/Series common	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.

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

FILED

APR 02 2012

BY 02 167816

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

E. Mark Siegal

Print or Type Name

President

Title

Date

7/27/11