



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

ROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

*Reporting 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
in (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

Corporate ID No. 16870	2. Name of Corporation HIGHWAY AUTO PARTS, INC.		
Street Address Principal Business Office Hopkins Hill Road		City West Greenwich	State RI
		Zip 02817	
Business Phone No. 401-397-3000	5. State of Incorporation RHODE ISLAND		

Brief Description of the Character of Business Conducted in Rhode Island
SALE OF USED CARS AND AUTO PARTS

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Norman E. Carpenter, Jr.	Vice President Name David Carpenter
Street Address Hopkins Hill Road	Street Address Hopkins Hill Road
City West Greenwich	City West Greenwich
State RI	State RI
Zip 02817	Zip 02817

Secretary Name Shelley A. Carpenter	Treasurer Name David Carpenter
Street Address Hopkins Hill Road	Street Address Hopkins Hill Road
City West Greenwich	City West Greenwich
State RI	State RI
Zip 02817	Zip 02817

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Norman E. Carpenter, Jr.	Director Name
Street Address Hopkins Hill Road	Street Address
City West Greenwich	City
State RI	State
Zip 02817	Zip

9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>	10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>
AUTHORIZED SHARES	ISSUED SHARES — THIS SECTION MUST BE COMPLETED
Number of Shares	Number of Shares
Class/Series	Class/Series
Par Value	Par Value
600 COMM NO PAR VALUE common no par value	-600- common no par value

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 _____ *16870
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

FILED
FEB 06 2013
20287

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.

X Norman E. Carpenter, Jr. ^{President}
Signature Date **1-9-13**

Norman E. Carpenter, Jr.
Print or Type Name
President
Title