RI SOS Filing Number: 201312457410 Date: 02/21/2013 4:00 PM

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 2013

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.	2. Exact name of the Corporation
61949	Ginger's Car Wash, Inc

3. Principal office address	City	State	Zip
110 Oak Street	Westerly	RI	02891

4. Business Phone No.	5. State of Incorporation
401-596-4421	Rhode Island

6. Brief description of the character of business conducted in Rhode Island
Operation of a car wash and related services.

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Eugene J. Gencarelli, Jr	110 Oak Street	Westerly	RI	02891

Vice-President Name	Street Address	City	State	Zip
Jeannine M. Gencarelli/ Brian Morrone, Executive VP	110 Oak Street	Westerly	RI	02891

Secretary Name	Street Address	City	State	Zip
Jeannine M. Gencarelli	110 Oak Street	Westerly	RI	02891

Treasurer Name	Street Address	City	State	Zip
Eugene J. Gencarelli Jr.	110 Oak Street	Westerly	RI	02891

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Eugene J. Gencarelli, Jr	Same as Above			
Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip
Jeannine M. Gencarelli	Same as Above			
Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100	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.

FILED

File Date _____

Check No _____ FEB 2 1 2013

By: _____ BY 25010

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.

Eugene Gencarelli Jr 2/16/13
Signature of Authorized Representative Date

Eugene J. Gencarelli, Jr. President
Print or Type Name of Authorized Representative

Form No. 630
Revised 10/2012 89013 1 839186