

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014 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. 7-1.2-15 subject to a penalty fee of \$25.00.	501(e), each corporation fai	ling or refusing to file its ann	ual report within thirty (30) days a	ifter the time prescribed by law	(R.I.G.L. 7-1.2-1501(c&d)) is	
1. Corporate ID No. 173507	2. Name of Corporation Berkeley Towing,	Inc.	nc.			
3. Street Address Principal Business Of 4 Whipple Street	fice		City Cumberland	State RI	^{Zip} 02864	
4. Business Phone No. 401-692-0241 5. State of Incorporation RI						
6. Brief Description of the Character of Business Conducted in Rhode Island Towing and transportation						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name David F. Bordalo			CHMENT)			
Street Address 26 Kent Street			Street Address 134C Howard Hill Rd.			
Cumberland	State RI	^{Zip} 02864	City Foster	State RI	^{<i>Zip</i>} 02825	
ecretary Name David F. Bordalo		Treasurer Name David F. Bordalo				
Street Address 26 Kent Street		Street Address 26 Kent Street				
Cumberland	State RI	^{Zip} 02864	City Cumberland	State RI	^{Ζφ} 02864	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name NONE		Director Name		5 -, -, -		
Street Address			Street Address		2 A0	
City	State	Zip	City	State	24-	
Director Name			Director Name			
Street Address		Street Address				
City	State	Ζip	City	State	Zip	
9. SHARES AUTHORIZED	•		10. SHARES ISSUED (* ISSUED SHARES — THIS SECTI		MENT) 🗆	
This information is currently of record in the Office of the Secretary of		Number of Shares	Class/Series	Par Value		
State. Changes require an additional filing. See Section 9 of instruction sheet.			1,000	Common	No Par	
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.						

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	FILED	Under penalty of perjury, I declare	and affirm that I have examined this report, ules and statements, and that all statements
	NOV 2 2 2013	contained hopein are true and corro	
File Date	NOV 2 2 2013 Cm 2/1391	Signature Signature	Date
Check No.		David F. Bordalo	
Ву:		Print or Type Name	
FOR SECRETARY OF STATE USE ONLY		President	
TON OLD MAN OF STREET OF STREET	_	Title	Form 630 Rev. 08/08