



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 2014

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. 83496		2. Exact name of the Corporation Providence Street Garage, Inc.			
3. Principal office address 326 Providence Street			City West Warwick	State RI	Zip 02893
4. Business Phone No. (401) 821-4620			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island Operation, management and control of a motor vehicle repair facility.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name James V. Petrarca			Vice-President Name Sheryl A. Petrarca		
Street Address Three Blossom Lane			Street Address Three Blossom Lane		
City Scituate	State RI	Zip 02831	City Scituate	State RI	Zip 02831
Secretary Name Sheryl A. Petrarca			Treasurer Name James V. Petrarca		
Street Address Three Blossom Lane			Street Address Three Blossom Lane		
City Scituate	State RI	Zip 02831	City Scituate	State RI	Zip 02831
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name James V. Petrarca			Director Name		
Street Address Three Blossom Lane			Street Address		
City Scituate	State RI	Zip 02831	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			600	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.

FILED

File Date

Check No

FEB 12 2014

By

BY

3894

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.

[Signature] 2/17/14

Signature of Authorized Representative

Date

James V. Petrarca

Print or Type Name of Authorized Representative