



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. 10190		2. Exact name of the Corporation SERPA'S INC.				
3. Principal office address 1282 HOPE STREET		City BRISTOL	State RI	Zip 02809		
4. Business Phone No. (401) 254-0150		5. State of Incorporation RHODE ISLAND				
6. Brief description of the character of business conducted in Rhode Island AUTO REPAIR SERVICES						
OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>						
President Name WILLIAM G. SERPA			Vice-President Name JANICE H. SERPA			
Street Address 1282 HOPE STREET			Street Address 1282 HOPE STREET			
City BRISTOL	State RI	Zip 02809	City BRISTOL	State RI	Zip 02809	
Secretary Name JANICE H. SERPA			Treasurer Name WILLIAM G. SERPA			
Street Address 1282 HOPE STREET			Street Address 1282 HOPE STREET			
City BRISTOL	State RI	Zip 02809	City BRISTOL	State RI	Zip 02809	
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>						
Director Name NONE			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. SHARES AUTHORIZED						9. 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	
			100	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

JUN 02 2014

Wesley

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 of Authorized Representative

WILLIAM G. SERPA

Print or Type Name of Authorized Representative

Date

5/2/14