



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

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 531061		2. Exact name of the limited liability company PAGE 1 AUTO TRANSPORT LLC.			
3. State of Formation RI		4. Brief description of the character of business conducted in Rhode Island TRANSPORT VEHICLES			
5. Principal office address 3129 PAWTUCKET AVE		City RIVERSIDE		State RI	Zip 02915
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name DENNIS PAGE			Contact Title OWNER		
Street Address 3129 PAWTUCKET AVE		City RIVERSIDE		State RI	Zip 02915
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

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SECRETARY OF STATE
CORPORATIONS DIV
2014 OCT 22 AM 9:51

FILED

OCT 22 2014

By 234798
AA

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 Person Dennis Page Date 10/22/14

Print or Type Name of Authorized Person DENNIS PAGE

File Date _____
Check No _____
By: _____
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