



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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 2015

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. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00

1. Corporate ID No. 18810		2. Name of Corporation PILGRIM MOTORS, INC.		
3. Street Address Principal Business Office 3760 Quaker Lane			City North Kingstown	State RI
			Zip 02852	
4. Business Phone No. 401-295-4998		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Auto dealership				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Mark DePasquale		Vice President Name Mark DePasquale		
Street Address 3760 Quaker Lane		Street Address 3760 Quaker Lane		
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI
Secretary Name Dana Palangio		Treasurer Name Mark DePasquale		
Street Address 3760 Quaker Lane		Street Address 3760 Quaker Lane		
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		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.		ISSUED SHARES - THIS SECTION MUST BE COMPLETED		
		Number of Shares	Class Series	Par Value
		600	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

JAN 23 2015

BY

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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]
Signature

Mark DePasquale

Print or Type Name

President

Title

File Date _____
Check No. _____
By: _____

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