



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

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Business Corporation
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2014

1. Corporate ID No. 000125418

2. Name of Corporation NORTH SMITHFIELD AUTOMOTIVE CENTER, INC.

3. Street Address Principal Business Office:

No. and Street: 106 GREENVILLE ROAD
City or Town: NORTH SMITHFIELD

State: RI Zip: 02896 Country: USA

4. Business Phone No.

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

TO PROVIDE AUTOMOBILE REPAIR SERVICES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|----------------|--|--|
| TREASURER | MICHAEL ROBERT MCALISTER | 85 RIVOULET STREET UXBRIDGE, MA 01569 USA |
| SECRETARY | MICHAEL HALBERT MCALISTER | 23 LAKE STREET BELLINGHAM, MA 02019 USA |
| PRESIDENT | MICHAEL H MCALISTER | 23 LAKE STREET BELLINGHAM, MA 02019- USA |
| VICE PRESIDENT | MICHAEL ROBERT MCALISTER | 85 RIVOULET STREET UXBRIDGE, MA 01569 USA |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized Shares <i>Number of Shares</i> | Total Issued and Outstanding <i>Num of Shares</i> |
|----------------|-----------------|---------------------|---|--|
| CNP | | \$0.0000 | 500.00 | 1000 |

9. 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.

Signed this 9 Day of March, 2015 at 2:31:36 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By MICHAEL HALBERT MCALISTER
Signature of Authorized Representative of the Corporation

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

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