

## 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 2016

Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

ILUKE TO FIL	E THIS REPORT BY M	ARCH 31 WILL RES	SULT IN A \$25.00 PEN	ALTY FEE.
2. Exact name	e of the Corporation			
ROMANA	ROMANA MUFFLER REPAIR, INC.			
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City PROVIDENCE	State <b>RI</b>	Zip <b>02907</b>
Business Phone No. <b>401) 781-0607</b>		5. State of Incorporation RI		
cter of business of ION AND RE	conducted in Rhode Island PAIR	1		
ES AND ADDRE	SSES) ("X" BOX FOR AT	TACHMENT)		
		****		<u> </u>
Street Address 11 LENOX AVE		Street Address		
State RI	Zip 02907	City	State	Zip
		Treasurer Name		
treet Address		Street Address		
State	Zip	City	State	Zip
MES AND ADDR	RESSES) ("X" BOX FOR	ATTACHMENT		
		Director Name		<u> </u>
		Street Address		
State RI	Zip <b>02907</b>	City	State	Zip
		Director Name	•	
		Street Address		
State	Zìp	City	State	Zip
		10. SHARES ISSUE	O ("X" BOX FOR ATTACH	IMENT)
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
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.		1000		NON PAR
	orporation by an authorize	id representative. If the	corporation is in the hand	of a raceiver or tructon
this report mus	t be executed on behalf of	the corporation by the	receiver or trustee.	a rocervor or ausiec,
1. Mar 8 1. S.		is report, includi) الزور	ng any accompanying s	chedules and statement
	Fu /	and that all statem	contained herein a	true and correct. 12/15/2015
	HILED	Signature of Author	Signature of Authorized Representative	
E USE ONLY	DEC 2 1 2015	Print or Type Name of Authorized Representative		
BY_	4L 13300	Ĵ		
	2. Exact name ROMANA  content of business of ION AND RE  ES AND ADDRE  State RI  State RI  State RI  State Ri  State Content of the content o	2. Exact name of the Corporation ROMANA MUFFLER REPAIR,  cter of business conducted in Rhode Island ION AND REPAIR  ES AND ADDRESSES) ("X" BOX FOR AT 02907  State Zip 02907  File RI 02907	City   PROVIDENCE	ROMANA MUFFLER REPAIR, INC.    City   PROVIDENCE   Ri     5. State of Incorporation   Ri     City   State of Incorporation   Ri     City   State of Incorporation   Ri     City   State   City   State     State   Zip   City   State     Ri   02907   City   State     State   Zip   City   State     State   Zip   City   State     State   Zip   City   State     Ri   O2907   City   State     State   Zip   City   State     State   Zip   City   State     Cit