



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.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>47758</u>		2. Exact name of the Corporation <u>DIAL OIL SERVICE - SOUTH, INC.</u>					
3. Principal office address <u>1010 TIOGUE AVENUE</u>		City <u>COVENTRY</u>	State <u>RI</u>	Zip <u>02816</u>			
4. Business Phone No. <u>401-821-4447</u>		5. State of Incorporation <u>RI</u>					
6. Brief description of the character of business conducted in Rhode Island <u>sale and delivery of fuel oil</u>							
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>							
President Name <u>RICHARD A. VENEZIA</u>		Vice-President Name <u>PATRICIA A. VENEZIA</u>					
Street Address <u>13 KENNEDY DRIVE</u>		Street Address <u>13 KENNEDY DRIVE</u>					
City <u>COVENTRY</u>	State <u>RI</u>	Zip <u>02816</u>	City <u>COVENTRY</u>	State <u>RI</u>	Zip <u>02816</u>		
Secretary Name <u>KERRI A. VENEZIA</u>		Treasurer Name <u>PATRICIA A. VENEZIA</u>					
Street Address <u>1512 VICTORY HIGHWAY</u>		Street Address <u>13 KENNEDY DRIVE</u>					
City <u>GREENE</u>	State <u>RI</u>	Zip <u>02827</u>	City <u>COVENTRY</u>	State <u>RI</u>	Zip <u>02816</u>		
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>							
Director Name <u>RICHARD A. VENEZIA</u>		Director Name <u>PATRICIA A. VENEZIA</u>					
Street Address <u>13 KENNEDY DRIVE</u>		Street Address <u>13 KENNEDY DRIVE</u>					
City <u>COVENTRY</u>	State <u>RI</u>	Zip <u>02816</u>	City <u>COVENTRY</u>	State <u>RI</u>	Zip <u>02816</u>		
Director Name		Director Name					
Street Address		Street Address					
City	State	Zip	City	State	Zip		
9. SHARES AUTHORIZED					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.					NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
					<u>600</u>	<u>COMMON</u>	<u>NO PAR</u>

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.

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

FILED

FEB 29 2016

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.

Richard Venezia 2/25/16  
Signature of Authorized Representative Date

RICHARD A. VENEZIA, PRES.  
Print or Type Name of Authorized Representative

KL 8980