

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

Fee: \$50.00

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

Foreign Business Corporation Annual Report

Filing Period: January 1 - March 1

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.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000514134

2. Name of Corporation ABC Moving Services, Inc.

3. Street Address Principal Business Office:

No. and Street: 33 INNER BELT ROAD

City or Town: SOMMERVILLE State: MA Zip: 02143 Country: USA

4. Business Phone No.

6176285837

5. State of Incorporation

State: MA

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

TRANSPORTATION OF OFFICE FURNITURE/GOODS OVER IRREGULAR ROUTES
THROUGHOUT
RHODE ISLAND

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	SAMUEL H. GRAVES JR.	33 INNER BELT ROAD SOMERVILLE, MA 02143 USA	
TREASURER	SAMUEL H GRAVES SR	33 INNER BELT ROAD SOMERVILLE, MA 02143 USA	
SECRETARY	NICHOLAS B. GRAVES	33 INNER BELT ROAD SOMERVILLE, MA 02143 USA	
CEO	SAMUEL H. GRAVES SR.	33 INNER BELT ROAD	

		SOMERVILLE, MA 02143 USA
DIRECTOR	NICHOLAS B GRAVES	33 INNER BELT ROAD
		SOMERVILLE, MA 02143 USA
DIRECTOR	SAMUEL H GRAVES JR.	33 INNER BELT ROAD
		SOMERVILLE, MA 02143 USA
DIRECTOR	SAMUEL H. GRAVES SR.	33 INNER BELT ROAD
		SOMERVILLE, MA 02143 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
STK		\$0.0000	15,000.00	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, 2016 at 2:36:34 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 SAMUEL H GRAVES, JR

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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