



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

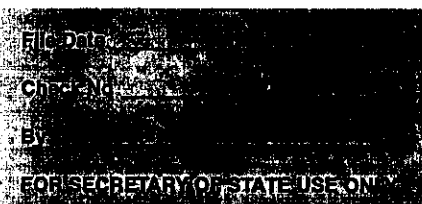
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

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. 141922		2. Exact name of the Corporation AMERICAN CARTING EXPRESS, INC.								
3. Principal office address 19 Tartaglia Street			City Johnston	State RI	Zip 02919					
4. Business Phone No. (401) 464-5955			5. State of Incorporation Rhode Island							
6. Brief description of the character of business conducted in Rhode Island TRANSPORTATION, DELIVERY, DISPOSAL OF GENERAL MATERIALS AND DEBRIS										
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT)										
President Name Susan M. Tartaglia			Vice-President Name Susan M. Tartaglia							
Street Address 19 Tartaglia Street			Street Address SAME							
City Johnston	State RI	Zip 02919	City	State RI	Zip					
Secretary Name Susan M. Tartaglia			Treasurer Name Susan M. Tartaglia							
Street Address SAME			Street Address SAME							
City	State	Zip	City	State	Zip					
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT)										
Director Name Susan M. Tartaglia			Director Name							
Street Address SAME			Street Address							
City	State	Zip	City	State	Zip					
Director Name			Director Name							
Street Address			Street Address							
City	State	Zip	City	State	Zip					
9. SHARES AUTHORIZED			10. SHARES ISSUED (X BOX FOR ATTACHMENT)							
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		
						200	COMMON	NO PAR		

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
 MAR 09 2016
 KL 3779

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.

Susan M. Tartaglia 3/7/16
 Signature of Authorized Representative Date

Susan M. Tartaglia
 Print or Type Name of Authorized Representative