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 2011

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.	2. Exact name of the Corporation		
70101	RONALD ROSSI, INC.		
3. Principal office address: P.O. Box 6893	City: Warwick	State: RI	Zip: 02887
4. Business Phone No.: 401-739-0688	5. State of Incorporation: RHODE ISLAND		
6. Brief description of the character of business conducted in Rhode Island: AUTO GLASS REPAIR			

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7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Ronald Rossi	207 Pettis Drive	Warwick	RI	02889

Vice-President Name	Street Address	City	State	Zip
Ronald Rossi	207 Pettis Drive	Warwick	RI	02889

Secretary Name	Street Address	City	State	Zip
Ronald Rossi	207 Pettis Drive	Warwick	RI	02889

Treasurer Name	Street Address	City	State	Zip
Ronald Rossi	207 Pettis Drive	Warwick	RI	02889

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Ronald Rossi	207 Pettis Drive	Warwick	RI	02889

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9. SHARES AUTHORIZED

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.

10. SHARES ISSUED (X BOX FOR ATTACHMENT) ☐

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.

FOR SECRETARY OF STATE USE ONLY

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.

FILED
MAR 21 2016
By 270486
A.A. 11:21 A.M.

Signature of Authorized Representative — Date: 3/2/16

RONALD ROSSI
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012