



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

Annual Report for the year: 2017

Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

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R.I. DEPT. OF STATE  
BUS SVCS DIV

2016 DEC 28 AM 8:59

1. Entity ID Number <u>791659</u>		2. Exact name of the Corporation <u>PAWTUCKET AUTOMOTIVE, INC.</u>	
3. Principal Office Address <u>262 BROADWAY</u>		City <u>PAWTUCKET</u>	State <u>RI</u>
4. NAICS Code <u>81</u>		6. Brief description of the character of business conducted in Rhode Island <u>Auto Body &amp; Repairs</u>	
5. State of Incorporation <u>Rhode Island</u>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <u>Domenic S. Coccia Jr.</u>		Vice-President Name <u>Domenic S. Coccia Jr.</u>	
Street Address <u>262 BROADWAY</u>		Street Address <u>262 BROADWAY</u>	
City <u>PAWTUCKET</u>	State <u>RI</u>	City <u>PAWTUCKET</u>	State <u>RI</u>
Zip <u>02860</u>		Zip <u>02860</u>	
Secretary Name <u>Domenic S. Coccia Jr.</u>		Treasurer Name <u>Domenic S. Coccia Jr.</u>	
Street Address <u>262 BROADWAY</u>		Street Address <u>262 BROADWAY</u>	
City <u>PAWTUCKET</u>	State <u>RI</u>	City <u>PAWTUCKET</u>	State <u>RI</u>
Zip <u>02860</u>		Zip <u>02860</u>	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES	
		CLASS/SERIES	
		PAR VALUE	
		<u>100</u>	
		<u>\$0.01</u>	
11. 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. <u>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.</u>			
Name of Authorized Representative <u>Domenic S. Coccia Jr.</u>		Date <u>12/28/16</u>	
Signature of Authorized Representative <u>Domenic S. Coccia Jr.</u>			

FILED

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DEC 28 2016

By 291780

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