



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.

1. Entity ID Number 64221		2. Exact name of the Corporation BOB'S A & A AUTO PARTS, INC.			
3. Principal Office Address 381 Huntington Avenue		City Providence		State RI	Zip 02909
4. Business Phone Number 401-943-6625		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island buy and sell auto parts					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Robert O. Pelland, Jr.		Vice-President Name Marilyn A. Pelland			
Street Address 381 Huntington Avenue		Street Address 381 Huntington Avenue			
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
Secretary Name Marilyn A. Pelland		Treasurer Name Robert O. Pelland, Jr.			
Street Address 381 Huntington Avenue		Street Address 381 Huntington Avenue			
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name N/A		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. Shares Authorized		1. Shares Issued		Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State. 1000 common no par value Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		1000	common	no par value	
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.					
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.					
Name of Authorized Representative Robert O. Pelland, Jr., President				Date Jan 7, 2017	
Signature of Authorized Representative <i>Robert Pelland Pres</i>				SIGN DOCUMENT HERE	

FILED

JAN 17 2017

BY

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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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Website: www.sos.ri.gov