



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.

<b>1. Entity ID Number</b> 907964		<b>2. Exact name of the Corporation</b> Uncle's Oil Company, Inc.			
<b>3. Principal Office Address</b> 266 Park Avenue		<b>City</b> Cranston		<b>State</b> RI	<b>Zip</b> 02905
<b>4. NAICS Code</b> 48-49 - Transportation and War		<b>6. Brief description of the character of business conducted in Rhode Island</b> Heating Oil Dealer			
<b>5. State of Incorporation</b> RI					
<b>7. List ALL officers (names and addresses)</b> <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
<b>President Name</b> Mardiros Tachjian			<b>Vice-President Name</b>		
<b>Street Address</b> 266 Park Avenue			<b>Street Address</b>		
<b>City</b> Cranston	<b>State</b> RI	<b>Zip</b> 02905	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Secretary Name</b>			<b>Treasurer Name</b> Mardiros Tachjian		
<b>Street Address</b>			<b>Street Address</b> 266 Park Avenue		
<b>City</b>	<b>State</b>	<b>Zip</b>	<b>City</b> Providence	<b>State</b> RI	<b>Zip</b> 02905
<b>8. List ALL directors (names and addresses)</b> <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
<b>Director Name</b>			<b>Director Name</b>		
<b>Street Address</b>			<b>Street Address</b>		
<b>City</b>	<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Director Name</b>			<b>Director Name</b>		
<b>Street Address</b>			<b>Street Address</b>		
<b>City</b>	<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>9. Shares Authorized</b> <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
<b>10. Shares Issued</b>					
<small>This information is currently of record in the Department of State.</small>					
<small>Changes require an additional filing.</small>					
<b>NUMBER OF SHARES</b>		<b>CLASS/SERIES</b>		<b>PAR VALUE</b>	
100		Common		.01	
<b>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.</b>					
<b>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.</b>					
<b>Name of Authorized Representative</b> Mardiros Tachjian				<b>Date</b> 01/10/2017	
<b>Signature of Authorized Representative</b> 					

SIGN DOCUMENT HERE

**FILED**

**JAN 19 2017**

**BY**

*1515 DS*

**MAIL TO:**  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov