



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.

FILED
JAN 23 2017 *OL*
7986

1. Entity ID Number 40026		2. Exact name of the Corporation Fred's Service Center, Inc.												
3. Principal Office Address 3730 Pawtucket Avenue		City East Providence		State RI	Zip 02915									
4. NAICS Code 81 - Other Services (except Pul	6. Brief description of the character of business conducted in Rhode Island Repair of any and all types of motor vehicles													
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Frederick A. Vinhateiro		Vice-President Name Patricia A. Vinhateiro												
Street Address 78 Read Street		Street Address 78 Read Street												
City East Providence	State RI	Zip 02915	City East Providence	State RI	Zip 02915									
Secretary Name Patricia A. Vinhateiro		Treasurer Name Frederick A. Vinhateiro												
Street Address 78 Read Street		Street Address 78 Read Street												
City East Providence	State RI	Zip 02915	City East Providence	State RI	Zip 02915									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name NONE		Director Name												
Street Address		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 This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>												
		<table border="1"><thead><tr><th>NUMBER OF SHARES</th><th>CLASS/SERIES</th><th>PAR VALUE</th></tr></thead><tbody><tr><td>100</td><td>Common</td><td>No Par</td></tr><tr><td></td><td></td><td></td></tr></tbody></table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common	No Par			
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100	Common	No Par												
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 Frederick A. Vinhateiro				Date 1/16/17										
Signature of Authorized Representative <i>Frederick A. Vinhateiro</i>				SIGN DOCUMENT HERE										