



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. Corporate ID No. <b>001661262</b>		2. Name of Corporation <b>US Valet, Inc.</b>			
3. Street Address Principal Business Office <b>17 Cocasset Street, Suite 6-5</b>			City <b>Foxborough</b>	State <b>MA</b>	Zip <b>02035</b>
4. NAICS Code <b>81</b>		5. State of Incorporation <b>Massachusetts</b>			
6. Brief Description of the Character of Business Conducted in Rhode Island <b>valet and parking management</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Jason R. Winpenny</b>			Vice President Name		
Street Address <b>17 Cocasset Street, Suite 6-5</b>			Street Address		
City <b>Foxborough</b>	State <b>MA</b>	Zip <b>02035</b>	City	State	Zip
Secretary Name <b>Jason R. Winpenny</b>			Treasurer Name <b>Jason R. Winpenny</b>		
Street Address <b>17 Cocasset Street, Suite 6-5</b>			Street Address <b>17 Cocasset Street, Suite 6-5</b>		
City <b>Foxborough</b>	State <b>MA</b>	Zip <b>02035</b>	City <b>Foxborough</b>	State <b>MA</b>	Zip <b>02035</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Jason R. Winpenny</b>			Director Name		
Street Address <b>17 Cocasset Street, Suite 6-5</b>			Street Address		
City <b>Foxborough</b>	State <b>MA</b>	Zip <b>02035</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES - THIS SECTION MUST BE COMPLETED		
			Number of Shares <b>100 common shares \$ .01 par value</b>	Class Series	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.

Signature

**FILED** 1-19-17  
Date

**Jason R. Winpenny**

**JAN 24 2017**

**President**  
Title

BY