



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 35526		2. Exact name of the Corporation MICHAEL, INC			
3. Principal Office Address 6195 POST ROAD		City N. KINGSTOWN		State RI	Zip 02852
4. NAICS Code 44-45		6. Brief description of the character of business conducted in Rhode Island AUTOMOTIVE REPAIRS			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name ROBERT A. CONN, JR			Vice-President Name SAME		
Street Address 6195 POST ROAD			Street Address SAME		
City N. KINGSTOWN	State RI	Zip 02852	City	State	Zip
Secretary Name			Treasurer Name		
Street Address SAME			Street Address SAME		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name			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 ☐		
			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
			1,000 CNP \$0		
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 A. CONN, JR				Date 2-1-17	
Signature of Authorized Representative <i>Robert A. Conn, Jr</i>				SIGN DOCUMENT HERE FILED	

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

FEB 06 2017

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FORM 630 - Revised: 10/2016