



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 <b>000104694</b>		2. Exact name of the Corporation <b>Executive Auto Wash, Inc.</b>			
3. Principal Office Address <b>726 Winter Street</b>		City <b>Woonsocket</b>		State <b>RI</b>	Zip <b>02895</b>
4. NAICS Code <b>81</b>	6. Brief description of the character of business conducted in Rhode Island <b>To engage in the servie of providing washing and cleaning to the interior and exterior finishes of automobiles.</b>				
5. State of Incorporation <b>Rhode Island</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Russell W. Picard</b>			Vice-President Name		
Street Address <b>4 Testa Circle</b>			Street Address		
City <b>No. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Russell W. Picard</b>			Director Name		
Street Address <b>4 Testa Circle</b>			Street Address		
City <b>No. Scituate</b>	State <b>Ri</b>	Zip <b>02857</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
			100		
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>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>					
Name of Authorized Representative <b>Russell W. Picard</b>					Date <b>2/1/2017</b>
Signature of Authorized Representative 					

## MAIL TO:

Division of Business Services

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

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Website: www.sos.ri.gov

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BY

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FORM 630 - Revised: 10/2016