RI SOS Filing Number: 201734956470 Date: 2/24/2017 4:00:00 PM

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.

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R.I. DEPT. OF STATE
BUS SVCS DIV
2017 FEB 23 PM 12: 59

1. Entity ID Number	2. Exact name of the Corporation			
86800	Inner City Auto Sales			
3. Principal Office Address: 540 Huntington	City: Providence	State: RI	Zip: 02907	
4. NAICS Code: 44-45	6. Brief description of the character of business conducted in Rhode Island: Auto Sales			
5. State of Incorporation: RI.				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: David Downes			Vice-President Name: David Downes		
Street Address: 54 Samuel Gorton Ave			Street Address: 54 Samuel Gorton Ave.		
City: Warwick	State: RI	Zip: 02889	City: Warwick	State: RI	Zip: 02889
Secretary Name: Olga Downes			Treasurer Name: Olga Downes		
Street Address: 651 Narr. Pky			Street Address: 651 Narragansett Pky		
City: Warwick	State: RI	Zip: 02888	City: Warwick	State: RI	Zip: 02888

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	10. Shares Issued — Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	100		10 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.

Name of Authorized Representative	Date
David Downes	2/22/17

Signature of Authorized Representative: Daniel Downe

FILED
FEB 24 2017
BY 1245

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

FORM 630 - Revised: 02/2017