| State   | of Rhode Island and Pro<br>Office of the Secreta |  | Fee: \$50.00   |  |  |  |
|---|--|--|----------------|--|--|--|
| Division Of Business Services<br>148 W. River Street<br>Providence RI 02904-2615                                |  |  |                |  |  |  |
| HOPE  | (401) 222-30                                     | 40   |                |  |  |  |
| Business Corporation<br>Annual Report<br>Filing Period: January 1 - March 1                                     |  |  |                |  |  |  |
| In accordance with R.I.G.L. 7-1.2<br>annual report within thirty (30) day<br>(c&d)) is subject to a penalty fee | s after the time prescribed by                   |  |                |  |  |  |
| ANNUAL REPORT YEAR: 2017  | 7  |  |                |  |  |  |
| 1. Corporate ID No. 0000  | 73532  |  |                |  |  |  |
| 2. Name of Corporation OCE  | EAN STATE AUTO AUCT                              | ION CORP.  |                |  |  |  |
| 3. Street Address Principal Bu  | siness Office:                                   |  |                |  |  |  |
| No. and Street:10 INDUSCity or Town:EXETER  | STRIAL DRIVE<br>Stat                             | te: <u>RI</u> Zip: <u>02822</u> Count                  | ry: <u>USA</u> |  |  |  |
| 4. Business Phone No.   |  |  |                |  |  |  |
| <u>401-397-2801</u>   |  |  |                |  |  |  |
| 5. State of Incorporation   |  |  |                |  |  |  |
| State: <u>RI</u>  |  |  |                |  |  |  |
|   | ARTICLE III                                      |  |                |  |  |  |
| Using the following NAICS code  | s, please select the code that t                 | pest describes your business.                          |                |  |  |  |
| NAICS Code  |  | 6 42   |                |  |  |  |
| 6. Brief Description of the Cha   | racter of Business Conducte                      | ed in Rhode Island                                     |                |  |  |  |
| MOTOR VEHICLE AUCTIC  | <u>N</u>   |  |                |  |  |  |
| 7. Names and Addresses of th  | e Officers and Directors:                        |  |                |  |  |  |
| All officers and directors m<br>Incorporator is no longer a   |  | or directors have been elected                         | l, the title   |  |  |  |
| Title   | Individual Name                                  | Address  |                |  |  |  |
| PRESIDENT   | First, Middle, Last, Suffix                      | Address, City or Town, State, Zip C<br>1095 FLANDERS R | DAD            |  |  |  |
|   |  | MYSTIC, CT 06355 US                                    | A              |  |  |  |

|   | Series of Stock                               | Par Value Per Share                              | Total Authorized<br>Shares<br>Number of Shares | Total Issued<br>and<br>Outstanding<br><i>Num of</i><br><i>Shares</i> |
|---|---|--|--|--|
| CNP   |   | \$0.0000   | 1,000.00                                       | 1000   |
| individuals signing this instru<br>signatory, under penalties of f<br>act and deed of the corporation<br>electronic filing, in compliance | perjury, that this in<br>on, and that the fac | strument is that indivisits stated herein are th | idual's act and d                              | eed or the   |
| By <u>BERNADETTE BEENEY</u><br>Signature of Authorized Rep  |   | orporation                                       |  |  |
|   |   |  |  |  |
|   |   |  |  |  |