



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>810944</b>		2. Exact name of the Corporation <b>Crane Salvage, Inc.</b>			
3. Principal Office Address <b>149 Selwyn Way #149</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>
4. NAICS Code <b>42 - Wholesale Trade</b>		6. Brief description of the character of business conducted in Rhode Island <b>In the business of buying and selling recyclable metal materials and removing abandoned vehicles and for any other legal purposes for which a company may legally conduct business</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>Raymond Selwyn, Jr.</b>			Vice-President Name		
Street Address <b>149 Selwyn Way #149</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City	State	Zip
Secretary Name <b>Raymond Selwyn, Jr.</b>			Treasurer Name <b>Raymond Selwyn, Jr.</b>		
Street Address <b>149 Selwyn Way #149</b>			Street Address <b>149 Selwyn Way #149</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>
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>Raymond Selwyn, Jr.</b>			Director Name		
Street Address <b>149 Selwyn Way #149</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <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.			NUMBER OF SHARES		CLASS/SERIES
			100		PAR VALUE
					no 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. <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>Raymond Selwyn, Jr.</b>				Date <b>2/25/17</b>	
Signature of Authorized Representative <i>Raymond Selwyn, Jr.</i>				<b>FILED</b> <b>APR 03 2017</b> BY <i>1087 DS</i>	

MAIL TO:  
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