



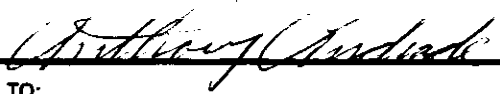
State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**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.

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV

2017 APR 18 PM 1:40

1. Entity ID Number <b>789782</b>		2. Exact name of the Corporation <b>Signature Transportation, Inc.</b>												
3. Principal Office Address <b>901 Waterman Avenue</b>			City <b>East Providence</b>	State <b>RI</b>	Zip <b>02914</b>									
4. NAICS Code <b>48-49—Transportation and Warehousing</b>		6. Brief description of the character of business conducted in Rhode Island <b>TRANSPORTATION SERVICES</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>ANTHONY F. ANDRADE</b>			Vice-President Name <b>NONE</b>											
Street Address <b>61 Winter Street</b>			Street Address											
City <b>Rehoboth</b>	State <b>MA</b>	Zip <b>02769</b>	City	State	Zip									
Secretary Name <b>ANTHONY F. ANDRADE</b>			Treasurer Name <b>ANTHONY F. ANDRADE</b>											
Street Address <b>61 Winter Street</b>			Street Address <b>61 Winter Street</b>											
City <b>Rehoboth</b>	State <b>MA</b>	Zip <b>02769</b>	City <b>Rehoboth</b>	State <b>MA</b>	Zip <b>02769</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>ANTHONY F. ANDRADE</b>			Director Name											
Street Address <b>61 Winter Street</b>			Street Address											
City <b>Rehoboth</b>	State <b>MA</b>	Zip <b>02769</b>	City	State	Zip									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized <b>This information is currently of record in the Department of State.</b>			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>											
Changes require an additional filing.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><b>100</b></td> <td><b>COMMON</b></td> <td><b>NO PAR VALUE</b></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<b>100</b>	<b>COMMON</b>	<b>NO PAR VALUE</b>			
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
<b>100</b>	<b>COMMON</b>	<b>NO PAR VALUE</b>												
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>ANTHONY F. ANDRADE, PRESIDENT</b>					Date <b>February 21, 2017</b>									
Signature of Authorized Representative 														

**FILED**

APR 18 2017

BY CU 301179