



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2017

1. Corporate ID No. 000092176

2. Name of Corporation TOURBILLON TRAILER SALES, INC.

3. Street Address Principal Business Office:

No. and Street: 401 SNAKE HILL RD
City or Town: NORTH SCITUATE

State: RI Zip: 02857 Country: USA

4. Business Phone No.

4019342221

5. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of business in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

81

6. Brief Description of the Character of Business Conducted in Rhode Island

HORSE AND UTILITY TRAILER SALES AND REPAIR.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

PRESIDENT	MICHAEL A DIPALMA	401 SNAKE HILL RD NORTH SCITUATE, RI 02857 USA
VICE PRESIDENT	JULIAN FORGUE	401 SNAKE HILL RD NORTH SCITUATE, RI 02857 USA
TREASURER	MICHAEL A DIPALMA	401 SNAKE HILL RD NORTH SCITUATE, RI 02857 USA
SECRETARY	MICHAEL A DIPALMA	401 SNAKE HILL RD NORTH SCITUATE, RI 02857 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	100.00	100

9. 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.

Signed this 17 Day of May, 2017 at 1:54:31 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By MICHAEL DIPALMA
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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