

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

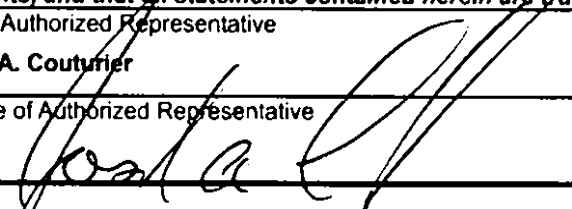
Annual Report for the year: 2018

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 000010135		2. Exact name of the Corporation Sentry Auto Sales, Inc			
3. Principal Office Address 988 Putnam Pike			City Chepachet	State RI	Zip 02814
4. NAICS Code 44112		6. Brief description of the character of business conducted in Rhode Island Sales of autos and trucks			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Joseph A. Couturier			Vice-President Name		
Street Address 107 Cooper Rd			Street Address		
City Harmony	State RI	Zip 02829	City	State	Zip
Secretary Name Jo-Ann M. Couturier			Treasurer Name Jo-Ann M. Couturier		
Street Address 107 Cooper Rd			Street Address 107 Cooper Rd		
City Harmony	State RI	Zip 02829	City Harmony	State RI	Zip 02829
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Joseph A. Couturier			Director Name Jo-Ann M. Couturier		
Street Address 107 Cooper Rd			Street Address 107 Cooper Rd		
City Harmony	State RI	Zip 02829	City Harmony	State RI	Zip 02829
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized					
This information is currently of record in the Department of State.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
Changes require an additional filing.			NUMBER OF SHARES 8,000	CLASS/SF/RLS CWP	PAR VALUE \$1.00
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 Joseph A. Couturier					Date 1-16-18
Signature of Authorized Representative 					

FILED

JAN 18 2018
4038 DS
BY