



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.

STAMP

FILE
TO THE CLERK OF STATE
USE ONLY

1. Entity ID Number 000064140		2. Exact name of the Corporation Shine On Auto Wash, Inc.												
3. Principal Office Address 1271 Warwick Avenue			City Warwick	State RI	Zip 02865									
4. NAICS Code 811190		6. Brief description of the character of business conducted in Rhode Island Car Wash												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name Riad Douleh			Vice-President Name Freda Douleh											
Street Address 520 Angell Road			Street Address 520 Angell Road											
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865									
Secretary Name Freda Douleh			Treasurer Name Freda Douleh											
Street Address 520 Angell Road			Street Address 520 Angell Road											
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
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. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment ☐											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>500</td> <td>Common</td> <td>No Par Value</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	500	Common	No Par Value			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE												
500	Common	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. 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 Riad Douleh					Date 1/19/18									
Signature of Authorized Representative <i>Riad Douleh</i>					SIGN DOCUMENT HERE									

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

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