



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**

FROM  
SECRETARY OF STATE  
RI ONLY

| 1. Entity ID Number<br><b>000130791</b>  |                    | 2. Exact name of the Corporation<br><b>P. C. Mart, Inc.</b>   |   |                    |                                 |                  |              |           |             |               |                  |  |  |  |
|--|--------------------|---|---|--------------------|---------------------------------|------------------|--------------|-----------|-------------|---------------|------------------|--|--|--|
| 3. Principal Office Address<br><b>408 Douglas Avenue</b>   |                    |   | City<br><b>Providence</b>   | State<br><b>RI</b> | Zip<br><b>02908</b>             |                  |              |           |             |               |                  |  |  |  |
| 4. NAICS Code<br><b>447100</b>   |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>TO Own and Operate a Service Station/Garage at 408 Douglas Avenue, Providence, RI</b> |   |                    |                                 |                  |              |           |             |               |                  |  |  |  |
| 5. State of Incorporation<br><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<br><b>Mohammed Hachem</b>   |                    |   | Vice-President Name   |                    |                                 |                  |              |           |             |               |                  |  |  |  |
| Street Address<br><b>1245 Chalkstone Avenue</b>  |                    |   | Street Address  |                    |                                 |                  |              |           |             |               |                  |  |  |  |
| City<br><b>Providence</b>  | State<br><b>RI</b> | Zip<br><b>02908</b>   | City  | State              | Zip                             |                  |              |           |             |               |                  |  |  |  |
| Secretary Name<br><b>Bassam Janoudi</b>  |                    |   | Treasurer Name<br><b>Yaser Janoudi</b>  |                    |                                 |                  |              |           |             |               |                  |  |  |  |
| Street Address<br><b>135 Rosemere Road</b>   |                    |   | Street Address<br><b>16 Church Street</b>   |                    |                                 |                  |              |           |             |               |                  |  |  |  |
| City<br><b>Pawtucket</b>   | State<br><b>RI</b> | Zip<br><b>02861</b>   | City<br><b>West Warwick</b>   | State<br><b>RI</b> | Zip<br><b>02893</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  |                    |   | 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<br>This information is currently of record in the Department of State.<br>Changes require an additional filing.   |                    |   | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |                                 |                  |              |           |             |               |                  |  |  |  |
|  |                    |   | <table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><b>1000</b></td> <td><b>Common</b></td> <td><b>\$1000.00</b></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table> |                    |                                 | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | <b>1000</b> | <b>Common</b> | <b>\$1000.00</b> |  |  |  |
| NUMBER OF SHARES   | CLASS/SERIES       | PAR VALUE   |   |                    |                                 |                  |              |           |             |               |                  |  |  |  |
| <b>1000</b>  | <b>Common</b>      | <b>\$1000.00</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.<br><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<br><b>Mohammed Hachem</b>  |                    |   |   |                    | Date                            |                  |              |           |             |               |                  |  |  |  |
| Signature of Authorized Representative<br>   |                    |   |   |                    | SIGN DOCUMENT HERE <b>FILED</b> |                  |              |           |             |               |                  |  |  |  |

MAIL TO:  
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