



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 000532977		2. Exact name of the Corporation ESPERANZA MUFFLER & AUTO REPAIR SHOP, INC	
3. Principal Office Address 953 BROAD STREET		City PROVIDENCE	State RI
		Zip 02908	
4. NAICS Code 811121	6. Brief description of the character of business conducted in Rhode Island GENERAL MECHANICAL AUTO REPAIR		
5. State of Incorporation RHODE ISLAND			
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name OTTO R MARCOS MARTINEZ		Vice-President Name OTTO R. MARCOS MARTINEZ	
Street Address 34 MARYLAND STREET 2ND FL		Street Address 34 MARYLAND STREET 2ND FL	
City PROVIDENCE	State RI	Zip 02909	City PROVIDENCE
			State RI
			Zip 02909
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
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		10. Shares Issued Check the box to indicate an attachment ☐	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES	
		CLASS/SERIES	
		PAR VALUE	
		500	STK
			0.0100
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 OTTO R MARCOS MARTINEZ		Date 02/08/2018	
Signature of Authorized Representative 			

FILED

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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