



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.

**FILED**

APR 05 2018

BY

1 Entity ID Number <b>40254</b>		2 Exact name of the Corporation <b>MILLER'S TRUCK SALES &amp; REPAIR, INC.</b>			
3 Principal Office Address <b>145 HIGGINSON AVENUE</b>		City <b>LINCOLN</b>		State <b>RI</b>	Zip <b>02865</b>
4 NAICS Code <b>811198</b>		6 Brief description of the character of business conducted in Rhode Island <b>TRUCK SALES AND REPAIR</b>			
5 State of Incorporation <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 <b>ROBERT J. MILLER</b>			Vice-President Name <b>ROBERT J. MILLER</b>		
Street Address <b>145 HIGGINSON AVENUE</b>			Street Address <b>145 HIGGINSON AVENUE</b>		
City <b>LINCOLN</b>	State <b>RI</b>	Zip <b>02865</b>	City <b>LINCOLN</b>	State <b>RI</b>	Zip <b>02865</b>
Secretary Name <b>ROBERT J. MILLER</b>			Treasurer Name <b>ROBERT J. MILLER</b>		
Street Address <b>145 HIGGINSON AVENUE</b>			Street Address <b>145 HIGGINSON AVENUE</b>		
City <b>LINCOLN</b>	State <b>RI</b>	Zip <b>02865</b>	City <b>LINCOLN</b>	State <b>RI</b>	Zip <b>02865</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 <b>ROBERT J. MILLER</b>			Director Name <b>ROBERT J. MILLER</b>		
Street Address <b>145 HIGGINSON AVENUE</b>			Street Address <b>145 HIGGINSON AVENUE</b>		
City <b>LINCOLN</b>	State <b>RI</b>	Zip <b>02865</b>	City <b>LINCOLN</b>	State <b>RI</b>	Zip <b>02865</b>
Director Name <b>ROBERT J. MILLER</b>			Director Name		
Street Address <b>145 HIGGINSON AVENUE</b>			Street Address		
City <b>LINCOLN</b>	State <b>RI</b>	Zip <b>02865</b>	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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
			100 COMMON NO PAR		
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.					
<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 <b>ROBERT J. MILLER</b>					Date <b>4/2/18</b>
Signature of Authorized Representative 					

## MAIL TO:

Division of Business Services

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

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Website: www.sos.ri.gov