



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.

RECEIVED
 SECRETARY OF STATE
 CORPORATION DIVISION
 2018 JUL 30 PM 3:19

1. Entity ID Number 000065939		2. Exact name of the Corporation J. Poulos' Automotive Center, Inc.			
3. Principal Office Address 85 Perry Avenue		City Warwick		State RI	
4. NAICS Code 811111		6. Brief description of the character of business conducted in Rhode Island To engage in all activities related to the automotive repair business and any other lawful activity.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name James N. Poulos			Vice-President Name James N. Poulos		
Street Address 85 Perry Avenue			Street Address 85 Perry Avenue		
City Warwick		State RI	Zip 02888	City Warwick	
Secretary Name James N. Poulos		Treasurer Name James N. Poulos			
Street Address 85 Perry Avenue			Street Address 85 Perry Avenue		
City Warwick		State RI	Zip 02888	City Warwick	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name James N. Poulos			Director Name		
Street Address 85 Perry Avenue			Street Address		
City Warwick		State RI	Zip 02888	City	
Director Name			Director Name		
Street Address			Street Address		
City		State	Zip	City	
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>					
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		PAR VALUE			
		2000	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 <i>James N. Poulos, President</i>				Date <i>7/21/18</i>	
Signature of Authorized Representative <i>James N. Poulos</i>					

FILED
 JUL 30 2018
HL 335951
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MAIL TO:
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