

FOR SECRETARY OF STATE USE ONLY

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State

.

Corporations Division 100 North Main Street Providence, RI 02903-1,335 401,222,3040

	y 1 - March I 🔹 .		RT FOR THE YEAR	R2005	5
1. Corporate ID No.	2 Name of Corpo	ration			
47414	Ultra Motor				
3 Street Address Principal B	Business Office	· ·	City	State	Zip
446 Dyer Av	enu <u>e</u>		Cranston	RI	02920
4 Business Phone No.		5. State of Incorporation			6. SIC Cixle
7. Brief Desertation of the Cl	Syrictor of Business Conducti	RHODE ISLAN	<u>י</u>		8953
8. NAMES AND ADDE	RESSES OF THE OFFIC	ERS: ("X" BOX FOR AT	Vice President Name	PACES BEFORE USING	G ATTACHMENTS
Robert Legar	ult	 	Robert Legau	1t	
36 Bicknell	Street		Same		
City	State	Zip	: City	State	Zip
Cranston	RI	02920			'
seemiary Name	············	•••••••	Treasurer Name		
Robert Lega	ult		Robert Legau	lt	
Street Address			Street Address		
Same	<u> </u>		Same		
City	State	Zip	City	State	Zip
Since Address Same City	State	Zıp	Street Address City	State	Zip
Director Name		J	Director Name		l
Street Address			Sireci Address		
City	State	Ztp	City:	State	Zip
10. SHARES AUTHOR AUTHORIZED SHARES	IZED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED (*	'X" BOX FOR ATTACH	MENT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE			100	Common	NPV
This report m	ust be signed in ink by	either the President, Vice	c President, Secretary, Assistan	nt Secretary, Treasurer,	Receiver or Trustee
			including any accomp	canying schedules and stat	nat I have examined this reperents, and that all stateme
File Date	20.05 UQ-11		contained herein are t		1/18/01
	UG 41	· 1	Signoure of Office	/	Date

Robert Legault
Print or Type Name of Officer

President



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

Matthew A. Brown, Secretary of State

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ______ 2004

• Filing Fee: \$50.00 Filing Period: January 1 - March 1 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 47414 Ultra Motor Car, Inc. 3 Street Address Principal Business Office State 02920 446 Dyer Avenue Cranston RI 6. SIC Code 5. State of Incorporation 4. Business Phone No. RHODE ISLAND. 8953 7. Brief Description of the Character of Business Conducted in Rhode Island AUTOBODY REPAIR FILL IN SPACES BEFORE USING ATTACHMENTS 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) Robert Legault Robert Legault Sircei Address Street Address 36 Bicknell Street Same State Zip Cranston 02920 RI Treasurer Name Secretary Name Robert Legault Robert Legault Street Address Street Address Same Same City State Z:p City State ☐ FILL IN SPACES BEFORE USING ATTACHMENTS 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) Director Name Director Name Robert Legault Street Address Street Address Same State Zip City State Zip Director Name Director Name Sircei Address Street Address State Zip City State Z.Ip 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES **AUTHORIZED SHARES** Class/Sencs Par Value Par Value Number of Shares Number of Shares Class/Series **100 NO PAR VALUE** Common NPV 100 This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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 Robert Legault Print or Type Name of Officer President FOR SECRETARY OF STATE USE ONLY Title of Officer

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _ 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 47414 Ultra Motor Car, Inc. 3. Street Address Principal Business Office City State 7.ip 02920 446 Dyer Avenue Cranston RI 5. State of Incorporation 4. Business Phone No. 6. SIC Code **RHODE ISLAND** 8953 7. Brief Description of the Character of Business Conducted in Rhode Island Autobody Repair 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Robert Legault Robert Legault Street Address Street Address 36 Bicknell Street Same City State Zip City State Zip RI 02920 Cranston, Secretary Name Treasurer Name Robert Legault Robert Legault Street Address Street Address Same Same City State ZIp City State 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Robert Legault Same Street Address Street Address 36 Bicknell Street Zip City State Zip 02920 RI Cranston Director Name Director Name Same Same Street Address Street Address City ZIp City State Zip State 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED (*x* BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Number of Shares

100

Par Value



Class/Series

Number of Shares

100 NO PAR VALUE

FOR SECRETARY OF STATE USE ONLY

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.

Class/Series

Common

Robert Legault

Print or Type Name of Officer

President

Title of Officer <#2> 5

Form 630 12/02

Par Value

NPV



Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

STOP PULASE, READ INSTRUCTIONS

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 47414 Ultra Motor Car, Inc. 3. Street Address Principal Business Office State 446 Dyer Avenue
4. Business Phone No. Cranston RI 02920 5. State of Incorporation 6. SIC Code RHODE ISLAND 8953 7. Brief Description of the Character of Business Conducted in Rhode Island Autobody Repair 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Nome Vice President Name Robert Legault Robert Legault Street Address 36 Bicknell Street 36 Bicknell Street State 02920 Cranston, Secretary Name Treasurer Name Robert Legault Robert Legault Street Address Street Address Same Same City State Zip City State ZIp 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name **Director Name** Robert Legault Robert Legault Street Address Street Address 36 Bicknell Street 36 Bicknell Street City Zio Cranston, RI . . 02920 02920 RI Cranston, Director Name Director Name Same Same Street Address Street Address State Zio City State 210 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES SANTS (CLOSS) Number of Shares Class/Series Number of Shares Par Value Par Value Class/Series

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



100 NO PAR VALUE

FOR SECRETARY OF STATE USE ONLY

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.

Common

that all statements contained herein are true and correct.

Robert Legault
Print or Type Name of Officer

President

Title of Officer

100

Enem K20 13/01

NPV

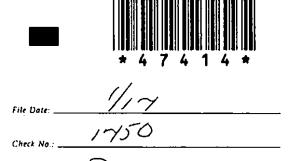
Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

rung	rerioa:	january	1-march 1	•	rung	ree: 350.	W

FORM MUST BE TYPED IN BLACI	K)					
. Corporate ID No. 47414	2. Name of Corporation Ultra Motor	Car, Inc.				
. Street Address Principal Business Of	ffice		City		State	ZIp
446 Dyer Avenue	2	5. State of Incorporation	Cranston	•	RI	02920 ^{6.} ક્રાંટ્ર દુઃલું
(401) 946-3090 Brief Description of the Character of	f Business Conducted in Rho	RHODE ISLAND de Island				0,,,,
Autobody Repair . NAMES AND ADDRESSE resident Name		S (*X* BOX FOR ATTACHN	(ENT) FILL IN SP Vice President Name	ACES BEFO	RE USING ATT	ACHMENTS
Robert Legault			Robert Le	gault		
36 Bicknell Str	ceet State	Zip	same City		State	Zip
Cranston	RI	02920	Treasurer Name			
Robert Legault			Robert Le	gault		
same	State	Zip	same _{City}	-	State	7.ip
. NAMES AND ADDRESSE	ES OF THE DIRECTO	ORS ("X" BOX FOR ATTAC	HMENT) FILL IN Director Name	SPACES BE	FORE USING AT	TTACHMENTS
Robert Legault			Robert Le	gault		
same	State .	Zip	same City		State :	Zip .
irector Name	•	••	Director Name		••	•
Robert Legault			Robert Le	gault		
same ny	State	Zip	same City		State	: ZIp
O. SHARES AUTHORIZED UTHORIZED SHARES	("X" BOX FOR ATTACHN	IENT)	11. SHARES ISSU	JED (*x* 80	X FOR ATTACHMI	ENT)
umber of Shares	Class/Series	Par Value	Number of Shares		Class/Series	Par Volue
100 NO PAR VALUE			100		Common	NPV

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FOR SECRETARY OF STATE USE ONLY

this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Under penalty of perjury, I declare and affirm that I have examined $\ \rightarrow \$

Robert Legault Print or Type Name of Officer

Title of Officer

President



James R. Langevin, Secretary of State 100 North Main Street, Providence, RI 02903-1335

Corporations Division 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 3. Street Address Principal Business Office City State 1757 Plainfield Pike Johnston RI 02919 4. Business Phone No. 7. Brief Description of the Character of Business Conducted in Rhode Island Autobody repair 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Robert Legault Street Address Street Address 36 Bicknell Street Zip RI Cranston Secretary Name Street Address Street Address City CID State Zip Z.ip 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Robert Legault Street Address Street Address same as above City Zip ZIp Director Name Director Name Street Address Street Address City City State Zip State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES CENTAL CHURZE Number of Shares Class/Series Number of Shares Class/Series Par Value 100 NO PAR VAL 100 common This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and statements contained hoedin are true and correct. Magnific of Officer Robert Legault Print or Type Name of Officer FOR SECRETARY OF STATE USE ONLY President Title of Officer



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP
PLEASE READ
INSTRUCTIONS

FORM MUST BE TYPED IN BLAC					<u> </u>
. Corporate ID No. 47414	2. Name of Corporat Ultra Motor				
. Street Address Principal Business O	ffice	·	1 City	State	Zip · _
1757 Plainfie	ld Pike	5. State of Incorporation RHODE ISLA		ˈRI	02919 6. SIC Code 8953
Brief Description of the Character o	f Business Conducted in	Rhode Island	•	•	
Autobody repair	ir		ACHMENT) FILL IN SPACES Vice President Name	BEFORE USING ATTAC	HMENTS
Robert Kerkali	LE. GAU	LT	Street Address		· - ·
36 Bicknell St	reet State	zip —- · ·	: City	- State	+ _{Zip}
Cranston	RI	02920	Treasurer Name		
treet Address	•		Street Address	- · -	
Hy	₹ State	zip	: City	State	- + ZIP
			•		•
	ES OF THE DIRE	CTORS ("X" BOX FOR A	TTACHMENT) FILL IN SPAC	ES BEFORE USING ATTA	CHMENTS
Prector Name Robert Legault		CTORS (*x* BOX FOR A		ES BEFORE USING ATTA	CHMENTS
rector Name Robert Legault rect Address same as above		CTORS (*x* box for a	Director Name	ES BEFORE USING ATTA	CHMENTS
Robert Legault treet Address same as above try	· · ·	· · ·	Director Name Street Address		
Robert Legault treet Address same as above try	· · ·	· · ·	Director Name Street Address City		
Robert Legault reet Address same as above rector Name	· · ·	· · ·	Director Name Street Address City Director Name		
Robert Legault reet Address same as above frector Name reet Address	State	Zip Zip	Director Name Street Address City Director Name Street Address City 11. SHARES ISSUED (State	Zip
Robert Legault treet Address same as above treet Address treet Address treet Address Uty O. SHARES AUTHORIZED UTHORIZED SHARES	State	Zip Zip	Director Name Street Address City Director Name Street Address City	State	Zip
Officector Name Robert Legault Itees Address	State State ("X" BOX FOR ATTA	Zip Zip CHMENT) (Director Name Street Address City Director Name Street Address City 11. SHARES ISSUED (ISSUED SHARES	State State State State STATE ATTACHMENT)	, Zip , Zip

Check No.:

Sy:

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer

Date

Robert Legault
Print or Type Name of Officer

_President

Title of Officer



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

STO	
PLEASE I	READ
INSTRUC	1000

(FORM MUST BE	TYPED IN	BLACK)					/
1. Corporate ID No	o.	2. Nam	e of Corporation	1			
.47414 3. Street Address F	Principai Busi	Ultr ness Office	a Motor C	ar, Inc.	City	State	Zip
4. Business Phone		Plainfi	ield Pi	ke 5. State of Incorpo	Johnston	RI	02919 6. SIC Code
7. Brief Description	n of the Char	acter of Business	Conducted in R	RHODE IS	SLAND		8953
	Autob	oody rep	pair				
8. NAMES Al President Name	ND ADDI	RESSES OF T	THE OFFIC	ERS ("X" BOX FOR	ATTACHMENT) Vice President Name		-
Street Address	Rober	t Lega	ılt		Street Address		
City	36 Bi	cknell State	Street	Zip	City	State	Zip
Crans Secretary Name	ton		RI	02920			٠
Street Address					Street Address		
City		State		Zip	City	State	Zip
9. NAMES A	ND ADD	RESSES OF	THE DIREC	CTORS ("X" BOX F	OR ATTACHMENT) Director Name		
Street Address	Robei	ct Lega	ult		Street Address		
City	same	as abor	ve	Zip	City	State	Zip
Director Name					Director Name		•
Street Address					Street Address		
City		State		Zip	City	State	Zip
10. SHARES		IZED ("X" BO	OX FOR ATTAC	CHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHMEN	r)
Number of Share:		Class/	Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO F	PAR VAL				100	common	NPV

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date:	20128
Check No.:	4886 10
Ву:	ILP
FOR SECRETAL	RY OF STATE USE ONLY

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 horein are true and correct.

Signature of Officer

Pobent Legault

Print or Type Name of Officer



Filing Period: January 1-March 1 • Filing Fee: \$50.00

Jumes R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

IFORM MUST BE TYPED IN I	BLACK)				THIST
I. Corporate ID No. 47414	2. Name of Corporation Ultra Motor			•	
3. Street Address Principal Busin	ess Office		City	State	Zip
1757 1. Business Phone No.	Plainfield P	ike S. State of Incorporation RHODE ISLA		RI	02919 6. SIC Code 8953
7. Brief Description of the Chara	cter of Business Conducted In	Rhode Island			
Autob B. NAMES AND ADDR President Name	ody repair ESSES OF THE OFFIC	CERS ("X" BOX FOR ATT	ACHMENT) Vice President Name		
Robert Leg	ault		Street Address		
36 Bicknel	1 Street State	Zip	City	State	Zip
Cranston George Name	RI	02920	Treasurer Name	`\ '	
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDR Director Name	ESSES OF THE DIRE	CTORS ("X" BOX FOR A	TTACHMENT) Director Name		
itreet Address			Street Address		
Sity	State	Zip	City	State	Zip
Director Name	• •	• .	Director Name		
itreet Address			Street Address		
City	State	Zip	. City	State	Zip
O. SHARES AUTHORI AUTHORIZED SHARES	ZED AND ISSUED (*x	* BOX FOR ATTACHMEN	T) ISSUED SHARPS	<u> </u>	
lumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VAL			100	Common	NPV

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

Signature of Officer Part 1-14-9

190bert Legioult

We of Officer

PROFII CORPORATION **ANNUAL REPORT**

1996



State of Knode Island and Providence Plantations James R. Langevin, Secretary of State

Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing	Fee:	\$50.	OO.

			PRINT IN BLACK INK.		
1. CORPORATE ID HO.	2. NAME OF CORPORATION	,			
47414	, Vltra	Motor Car, Inc.			
3. STREET ADDRESS PRIVICIPAL BUSINESS OF	RÖL	_ · ·	ary	STATE	ZP CODE
1757 Plain	field_Pike	S. STATE OF INCORPOGATION	<u>Johnston</u>	RI	02919 6 SC COOE
(401) 946-		RHODE IS	SLAND		, 8953
7. BREEF DESCRIPTION OF THE CHARACTER OF	BUSIVESS CONDUCTED IN PRIOC	DE ISLAND			
autobody r	8 . N	AMES AND ADDR	ESSES OF THE OF VICE PRESIDENT NAME	FICERS	
Robert_Leg	<u>ault</u>		STREET ADDRESS	····	
36_Bicknel	l Street		• • • • • • • • • • • • • • • • • • •		
αïΥ	STATE	ZIP COOE	ary	STATE	ZIP COOE
Cranston_	RI_	02920	TREASURER NAME		
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		STREET ADDRESS		
city	STATE	ZIP CODE	<u> </u>	• STATE	72P CO05
U	Janic	1	:	SIRIE	I Drawe
DIRECTOR NAME	9 N	AMES AND ADDR	ESSES OF THE DI	RECTORS	- /
STREET ADDRESS			STREET ADDRESS		
OTY	i STATE	. ZIP COOE		STATE	
í	SIAIE	Dr cate	4 uit) SIAIE	7IP COOE
DIRECTOR NAME		<u>-</u>	DIRECTOR NAME		
STREET AODRÉSS			STREET ADDRESS		·
ari	STATE	· T zīP COOE	, ciiv	STATE	ZP C005
·			•		<u> </u>
· · · · · · · · · · · · · · · · · · ·	10.	SHARES AUTHOR	IZED AND ISSUED		
	AUTHORIZED SHARES			ISSUED SHARES	···
MUMBER OF SHARES	CLASS / SERVES	PAR VALUE	MUMBER OF SHARES	CLASS / SERCES	PAR VALUE
100 NO PAR	VAL		,	1	•
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·			· -	- 1	
Pres	Th ident Vice Presi	nis report must be SIC	SNED IN INK by either the stant Secretary, Treasurer,	e Popoiver or Tructe	
1163	ident, vide i resi	derit, decretary, Assis	Under penalty of	f periury. I declare and	affirm that I have examined this
			all statements	intained herein are true	nedules and statements, and that and correct.
File Date: 1/29/	16			In-	fred.
I lie Date.	^		Signature of Office		
File Date: 1/29/6	U			rt Legault	
\mathcal{L}		6	Print or Type Nar	ne of Officer	14
By: For Secretary of S	tete Use Only		Pres Title of Officer	ident	1/24/96

Title of Officer

Date

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

Chiff 273 ANNUAL REPORT
Please Type or Print

File Annually – Jan. 1 - March 1

Filing Fee \$50.00 Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID:	Annual Report fo	Annual Report for the year:			
	_	•			
Name of Corporation: Business entity organized under the laws of the State of: For foreign entity, address and telephone number of prir	ncipal office: [x] Busines:	Business Entity is (check one): [x] Business Corporation (See RIGL Chapter 7-1.1) [] Professional Service Corporation (See RIGL Chapter 7-5.1)			
Phone: () Address and telephone of the principal office of busines Island (Provide street address - Not P.O. Box): 1757 Plainfield Johnston, RI 02	Brief stateme Aut s critity in Rhode Pike 2919	nt of the character of business conduct obody_Repair			
Phone: (401) 946-3090					
	THE NAMES OF THE OFFICERS	ARE:			
PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE		
Robert Legault VICE PRESIDENT	36 Bicknell Ave.,	Cranston, RI	ZIP CODE		
SECRETARY	STREET ADDRESS	CHYSTATE	Z!P CODE		
TREASURER	STREET ADDRESS	CITYSTATE	ZIP CODE		
	THE NAMES OF THE DIRECTORS	ARE:			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE		
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE		
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE		
NUMBER OF SHARES AUTHORIZED (Rider may be att	ached) NUMBER OF SH	ARES ISSUED AND OUTSTANDING (R	ider may be attached)		
Number of Shares Class / Series	Number of Share	cs Class / Scries			
100 Common	100	Common			
Date 1-20-55 .19 7	By: Robert Le	25 au 1+			
Form 31 1/95	TITLE OF OFFICER SIGNING	NAME OF THE PARTY			
DESIGNATE	D REGISTERED AGENT FOR SERV	ICE OF PROCESS:			

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect. Form 9 must be filed.

JAMES & TOTAL MARKE

ROBERT LEGAULT 1757 PLAINFIELD PIKE JOHNSTON RI 02919 Filing Fee \$50.00 Payable to: Secretary of State

PLEASE TYPE or PRINT

File Annually LLC: Sept. 1 - Nov. 1 CORP, Jan. 1 - March 1

State of Rhode Island and Providence Plantations Office of The Secretary of State

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

0047414 Corporate ID	Annual Report for the year:
Сограние го.	Ultra Motor Can, Inc.
Name of Business Entity:	
Business entity organized under the laws of the State of RI . Federal Taxpayer Identification Number	Business Entity is (check one) [X] Business Corporation (See RIGL Chapter 7-1.1) [1] Professional Service Corporation (See RIGL Chapter 7-5.1)
For foreign entity, address and telephone number of principal office:	() I consider the time Community Case DICL 7-163
Tel tiver, it climy, address and temperature to prove you	Name, title and mailing address of contact person to whom
	Robert Legault, President
·	
Phone: ()	Johnston, RI 02919
Address and teleptione of the principal office of business entity in R Island (Provide street address - Not P.O. Box).	Brief statement of the character of business conducted in Rhode Island.
1757 Plainfield Pike	autobody repair
Johnston, RI 02919	
	Date of Organization.
Phone. <u>§ 401) 946-3090</u>	Date of Qualification to do business in Rhode Island (if foreign entity)
☐ CHIST-EXECUTIVE OFFICER OF TAPPENDENT ICHAS ONE	MES OF THE OFFICERS ARE: ZIPCOOF
Robert Legault 36 Bickne	STREET AU'RESS CHYNTAIL 02920 - ZEPCODE
CUSTODIAN OF RECORDS ON COSCRETARY GNECOM	STREET AUDRESS C. TYXSTATE 2.P CTOP
CHIEF TINASCIAL OF ICER OR THE TREASURER (ON VOM	STREET ADDRESS CITYATATE ZIF CODE
THE NAME	MES OF THE DIRECTORS ARE: MEDIADORESS C.P.STATE DIRECTOR
NAME	STREET ADDRESS CITY/STATE ZECONO
NAME:	SURGET ADDRESS CUTVISTATE 7 P CODE
NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 100	NUMBER (10°C)
CLASS COMMEN	CLASS COMMON
SERIES Nupt.	SERIES
PAR VALUE OR WITHOUT PAR N P V	PAR VALUE OR N P V
Date February 9 1994	By Holar Leger &
	Robert Legault PRINTOR TYPE SAME OF OFFICER SHANGE
	President
	TITLE OF THE LEWIS SING
Form 31 - 1/94	
DESIGNATED REGISTERED	OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE. If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

POBERT LEGAULT 1757 PLAINFIELD PIKE JOHNSTON 91 02919 FILED

MAR 1 () (59.1 By ME59 2243

To be filed annually between January 1st and March 1st

Corporate ID 0047	414	Annual Report fo	or the year 1993	
First: The name of	the corporation is <u>Ulti</u>			
THIRD: Character o	f business, briefly stated, is	s auto body repair		
FOURTH: If foreign	corporation, address of its	principal office		
FIFTH: Business add	fress in Rhode Island1	757 Plainfield Pike	Johnston, RI 02919	
SIXTH: Names and	addresses of its directors a	and officers: (Attach rider if necessa e Address (including number, street, zip code)		
	Director			
	Director			
	Director			
•••••	t President		venue Cranston, RI	
	Vice Pres	sident		
•••••••••••••••••••••••••••••••••••••••	Secretary			
	Treasure	r		
SEVENTH: Number	of Shares authorized:		Par Value or statement that shares are without	
No. of Shares	Class	Series	par value	
Еіднтн: Number o	of Shares issued:	•	Par Value or statement that shares are without	
No of Shares	Class	Senes .	par value	
Dated November	18 19 93	Ultra Motor Car	Inc.	
	•	By flered for	<i>u</i> –	
(Report must be	signed by an officer)	Tille President		

474	14
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Corporate ID		Annual Report for the	e year1992
First: The name of the co	rporation isUltra	Motor Car Inc.	
SECOND: It is incorporated	under the laws of	Rhode Island	
THIRD: Character of busine	ess, briefly stated, is?	auto body repair	
FOURTH: If foreign corpora	ation, address of its pri	ncipal office	
FIFTH: Business address in	Rhode Island 175		Johnston, RI 02919
SIXTH: Names and address	es of its directors and o		(Attach rider if necessary) umber, street, zip code)
	Director		
	Director		
	Director		, <u>.</u>
Robert Legault	President	36 Bicknell Avenue	Cranston, RI 02920
11 H	Vice Presider	nt	
	Secretary		
	Treasurer		
SEVENTH: Number of Shar	es authorized:	α ′3	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
	<i>ر بر</i> لاً س. ب _ن		
Eіднтн: Number of Share	s issued:	ECY OF STATE	Par Value or statement that
No of Shares	Class	Series	shares are without par value
Dated December 14,	19 ⁹²	VITA MOTOR Name of Corporation)	CAN INC.
(Report must be signed by	By an officer)	itle President	- V0

Corporate ID.	0047414		Annual Report for	r the year ¹⁹⁹¹
-		oration is		ar, Inc.
Second:	It is incorporated ur	nder the laws ofRI		
THIRD:	Character of business,	, briefly stated, isA.	JTO BODY REPAIR	
Fourth:	If foreign corporation	on, address of its prin	cipal office	
Г ігтн:				KE
••••••		J	OHNSTON, RI	02919
Ѕіхтн:	Names and addresses	of its directors and o		(Attach rider if necessar
ROBER	RT LEGAULT	Director	36 BICKNELL AVE	CRANSTON, RI
		Director		
	. 	Director		to the state of th
ROBER	RT LEGAULT	President	36 BICKNELL AVE	CRANSTON. RI
	RT LEGAULT			CRANSTON, RI
	RT LEGAULT	Secretary		CRANSTON, RI
ROBER		Treasurer		CRANSTON, RI
4444+++44+++44+++1+1+444				
Seventh	: Number of Shares	authorized:		Par Value or statement that shares are without
No. of Sha		Class	Series	
100	Com	mon	Series Stay	NPV
			Ec., Oc	
Eighth:	Number of Shares is	ssued:	Or S	Par Value or statement that
No. of Sha	ares	Class	Series 37	shares are without par value
100	Com	mon	•	, NPA
Dated	3 - 5	. 19 ⁵ /	ULTRAMOTORCAE	R, INC
Pa.		Ву	John (Logell
/D/	eport must be signed by an	officer) Tit	le Pro	
1110	opon mast of signed by an	J	Angra (F) Free - 1 1 mm F - Fe	***************************************

Corporate ID	0047414				oort for the	90 year 19 88
First: The	name of the corporation	on isULT	RA MOTI	RO CAR,	INC.	
SECOND: It is	is incorporated under	the laws of	RHODE]	SLAND		
THIRD: Cha	racter of business, brie	fly stated, is	AUTO BO	DDY REPA	AIR	
Fourth: If	foreign corporation, ac	ddress of its pr	rincipal of	fice		
FIFTH: Busir	ness address in Rhode	Island 1	757 PL	AINFIELD	PIKE	
••		J	OHNSTON	I, RI	0291	9
	es and addresses of its	directors and	officers:	Addre	ess (including nu	(Attach rider if necessary)
ROBERT	LEGAULT	Director	36 E	BICKNELL	AVE.,	CRANSTON, RI
***************************************		Director	•••••	• • • • • • • • • • • • • • • • • • • •		
•		Director	*,*******	**'>*>	*****************	
ROBERT	LEGAULT	President	36 E	BICKNELL	AVE.,	CRANSTON, RI
II	II	Vice Preside	ent	n	11	11
11	11			Ir	n	ŧI
11	11	Treasurer	*********	II	n	11
SEVENTH: N	umber of Shares author	or ized :				Par Value or statement that
No of Shares 100	Class Common			Series	•	shares are without par value NPV
EIGHTH: Nu	mber of Shares issued			SEC.	1997 1997	Par Value or statement that shares are without par value
100	Common			U _k	STATE	NPV
Dated 3-5	<u>. </u>	9/ B	ULTRA	MOTOR	CAR, IN	
(Report n	nust be signed by an office	r) I	Title	?s.		

Corporate ID	00474	L 4	Annual Rep	ort for the yea	ır1989	
First:	The name of the corporation is ULTRA MOTRO CAR, INC.					
Second:	It is incorporated und	er the laws of RHO	DE ISLAND		•••••••••••••••••••••••••••••••••••••••	
THIRD:	Character of business, b	riefly stated, is AUT	O BODY REPA	IR		
Fourth:	If foreign corporation	, address of its princip	oal office			
Г ігтн:	Business address in Rho	de Island 1757	PLAINFIELD	PIKE		
		JOHN	STON, RI	02919		
Ѕіхти:	Names and addresses of	its directors and office		ss (including number	(Attach rider if necessary)	
ROBE	RT LEGAULT	Director	36 BICKNELL	AVE., CR	ANSTON, RI	
	•••••	Director			·····	
		Director	••••		••••••	
ROB	BERT LEGAULT	President	36 BICKNELL	AVE., CR	ANSTON, RI	
	11	Vice President	11	19	11	
	11	Secretary	m	11	11	
		Treasurer	11	11	п	
Seventh	: Number of Shares au	thorized:			Par Value or statement that shares are without	
No. of Sha 100		255	Series		par value	
100	Conunc	,,,,			NPV	
Еіднтн:	Number of Shares issu	ed:	360	19 0 7 1997 Or 572	Par Value or statement that shares are without	
No. of Sha		ass	Series F	On 1997	par value	
10	0 Commor	1		(8) A	NPV	
Dated	3-5		LTRA MOTOR (CAR, INC		
		By	Halut	Jegu	18	
(Re	eport must be signed by an of	ficer) Title	195	•-•••		