



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2019
Corporation

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 DIV.
 2018 DEC 17 PM 11:23:37

- 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 878637		2. Exact name of the Corporation Center of New England Collision, Inc.	
3. Principal Office Address 308 Hopkins Hill Rd.		City Coventry	State RI
4. NAICS Code 81121		6. Brief description of the character of business conducted in Rhode Island Auto Body	
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Olga Downes		Vice-President Name Olga Downes	
Street Address 651 Narragansett Pky.		Street Address 651 Narragansett Pky	
City Warwick	State RI	Zip 02888	City Warwick
Secretary Name Olga Downes		Treasurer Name Olga Downes	
Street Address 651 Narragansett Pky		Street Address 651 Narragansett Pky	
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 Olga Downes		Director Name	
Street Address 651 Narragansett Pky.		Street Address	
City Warwick	State RI	Zip 02888	City
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City
9. Shares Authorized		10. Shares Issued 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 100	CLASS/SERIES
			PAR VALUE 10 per share
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 Olga Downes		Date 12/17/18	
Signature of Authorized Representative <i>Olga Downes</i>		FILED SIGN DOCUMENT HERE DEC 17 2018 BY KL 9684	