



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2019

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

STAMP

FOR  
FILING ONLY

1. Entity ID Number <u>000082650</u>		2. Exact name of the Corporation <u>Lucios Auto Sales Service Inc.</u>	
3. Principal Office Address <u>337 Admiral Street</u>		City <u>Prov.</u>	State <u>R.I.</u>
4. NAICS Code <u>44120</u>		6. Brief description of the character of business conducted in Rhode Island <u>Mechanic - Auto Sales Works</u>	
5. State of Incorporation <u>R.I.</u>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <u>Luico Barone</u>		Vice-President Name <u>Marisa Barone</u>	
Street Address <u>36 Christopher St.</u>		Street Address <u>36 Christopher St.</u>	
City <u>Prov.</u>	State <u>R.I.</u>	City <u>Prov</u>	State <u>R.I.</u>
Zip <u>02904</u>		Zip <u>02904</u>	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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 <u>1,000.00</u>	CLASS/SERIES <u>NONE</u>
			PAR VALUE <u>No Par Value</u>
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 <u>Lucio Barone</u>		Date <u>2/11/19</u>	
Signature of Authorized Representative <u>[Signature]</u>		SIGN DOCUMENT <b>FILED</b>	

FEB 11 2019

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