



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

FILED

FEB 11 2019

BY 4521

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.

1. Entity ID Number 106552		2. Exact name of the Corporation D&K PITCHER'S AUTO SALVAGE, INC.			
3. Principal Office Address 214 BOSTON NECK ROAD			City NORTH KINGSTOWN	State RI	Zip 02852
4. NAICS Code 811198		6. Brief description of the character of business conducted in Rhode Island TO ENGAGE IN THE PURCHASE, REPAIR, SALE, AND TOWING OF PASSENGER AND COMMERCIAL VEHICLES, PARTS, ACCESSORIES AND RELATED ITEMS.			
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 DEREK R. BROOME			Vice-President Name DEREK R. BROOME		
Street Address 214 BOSTON NECK ROAD			Street Address 214 BOSTON NECK ROAD		
City NORTH KINGSTOWN	State RI	Zip 02852	City NORTH KINGSTOWN	State RI	Zip 02852
Secretary Name DEREK R. BROOME			Treasurer Name DEREK R. BROOME		
Street Address 214 BOSTON NECK ROAD			Street Address 214 BOSTON NECK ROAD		
City NORTH KINGSTOWN	State RI	Zip 02852	City NORTH KINGSTOWN	State RI	Zip 02852
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name DEREK R. BROOME			Director Name		
Street Address 214 BOSTON NECK ROAD			Street Address		
City NORTH KINGSTOWN	State RI	Zip 02852	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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	CLASS/SERIES	PAR VALUE
			200	COMMON	NONE
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. <i>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.</i>					
Name of Authorized Representative DEREK R. BROOME, PRESIDENT				Date 1/28/19	
Signature of Authorized Representative 					