



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.

FILED

MAR 01 2019

BY

2112

1. Entity ID Number 2858		2. Exact name of the Corporation Bristol Auto Salvage, Inc.												
3. Principal Office Address 48 Broad Common Road			City Bristol	State R.I.	Zip 0280981									
4. NAICS Code 81111		6. Brief description of the character of business conducted in Rhode Island Scrap Metal Salvage-Purchase and Sale of Bulk Metals (all forms of business)												
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 Sabato Stanzione			Vice-President Name Michael Stanzione											
Street Address 12 Greenway Drive			Street Address 7 Thompson Street											
City Bristol	State R.I.	Zip 02809	City Warren	State R.I.	Zip 02885									
Secretary Name Lorraine Stanzione			Treasurer Name Lorraine Stanzione											
Street Address 12 Greenway Drive			Street Address 12 Greenway Drive											
City Bristol	State R.I.	Zip 02809	City Bristol	State R.I.	Zip 02809									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name N/A			List the names and addresses of the directors, if applicable. If you require additional space check the attachment box and be sure to include the entity ID number on the attachment.											
Street Address														
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.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>600</td> <td>Common</td> <td>0</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	600	Common	0			
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600	Common	0												
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 Lorraine Stanzione				Date 2/10/2019										
Signature of Authorized Representative <i>Lorraine Stanzione</i>														