



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 80920		2. Name of Corporation Plainfield Auto Sales, Inc.			
3. Street Address Principal Business Office 292 Plainfield Street			City Providence,	State RI	Zip 02909
4. Business Phone No. (401) 943-7666		5. State of Incorporation RHODE ISLAND			6. SIC Code 3335
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF BUYING, SELLING AND REPAIRING MOTORING VEHICLES OF EVERY TYPE AND DESCRIPTION.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Marcotulio Santos			Vice President Name Osman Garcia		
Street Address 121 Laban Street			Street Address 11 Bennington Road		
City Providence	State RI	Zip 02909	City Cranston	State RI	Zip 02920
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class Series	Par Value	Number of Shares	Class Series	Par Value
500	NO PAR VALUE				

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



File Date 2/16/05
Check No. 153
By: 2
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.

Marcotulio Santos 2/16/05
Signature of Officer Date

Marcotulio Santos
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 80920		2. Name of Corporation Plainfield Auto Sales, Inc.			
3. Street Address Principal Business Office 292 Plainfield Street			City Providence	State RI	Zip 02909
4. Business Phone No. 401 943-7666		5. State of Incorporation RHODE ISLAND		6. SIC Code 3335	
7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF BUYING, SELLING AND REPAIRING MOTORING VEHICLES OF EVERY TYPE AND DESCRIPTION.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Joseph Pisaturo			Vice President Name Vincent Pisaturo		
Street Address 292 Plainfield Street			Street Address 292 Plainfield Street		
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
Secretary Name Joseph Pisaturo			Treasurer Name Vincent Pisaturo		
Street Address (same)			Street Address (same)		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 NO PAR VALUE			NONE		

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



* 8 0 9 2 0 *

File Date 3/12/04
Check No. 41712
By: [Signature]
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] /20/04
Signature of Officer Date
Joseph Pisaturo
Print or Type Name of Officer
President
Title of Officer



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. **80920**
2. Name of Corporation **Plainfield Auto Sales, Inc.**
3. Street Address Principal Business Office
292 Plainfield Street
4. Business Phone No. **401-943-7666**
5. State of Incorporation **RHODE ISLAND**

City **Providence** State **RI** Zip **02909**
6. SIC Code **3335**

7. Brief Description of the Character of Business Conducted in Rhode Island
Selling of used Automobiles

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **Joseph Pisaturo**
Street Address **292 Plainfield Street**
City **Providence** State **RI** Zip **02909**

Vice President Name **Vincent Pisaturo**
Street Address **292 Plainfield Street**
City **Providence** State **RI** Zip **02909**

Secretary Name **Joseph Pisaturo**
Street Address **(same)**
City _____ State _____ Zip _____

Treasurer Name **Vincent Pisaturo**
Street Address **(same)**
City _____ State _____ Zip _____

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **NONE**
Street Address _____
City _____ State _____ Zip _____

Director Name _____
Street Address _____
City _____ State _____ Zip _____

Director Name _____
Street Address _____
City _____ State _____ Zip _____

Director Name _____
Street Address _____
City _____ State _____ Zip _____

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
500 NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
NONE

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



* 8 0 9 2 0 *

File Date: 4-3-03
Check No.: 4291
By: [Signature]

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] 2/19/03
Date

Joseph Pisaturo
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **80920** 2. Name of Corporation **Plainfield Auto Sales, Inc.**
3. Street Address Principal Business Office **292 Plainfield Street** City **Providence** State **RI** Zip **02909**
4. Business Phone No. **(401) 943-7666** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3335**
7. Brief Description of the Character of Business Conducted in Rhode Island
Selling of used automobiles.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Joseph Pisaturo Street Address 292 Plainfield Street City Providence State RI Zip 02902	Vice President Name Vincent Pisaturo Street Address 292 Plainfield Street City Providence State RI Zip 02909
Secretary Name Joseph Pisaturo Street Address (Same) City Providence State RI Zip 02902	Treasurer Name Vincent Pisaturo Street Address (Same) City Providence State RI Zip 02909

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Street Address City Providence State RI Zip 02902	Director Name Street Address City Providence State RI Zip 02909
Director Name Street Address City Providence State RI Zip 02902	Director Name Street Address City Providence State RI Zip 02909

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
500	NO PAR VALUE	

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
500	No Par Value	

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



* 8 0 9 2 0 *

File Date: 2/25/2002
Check No.: 3880
By: [Signature]

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] 2/20/02
Signature of Officer Date

Joseph Pisaturo
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **80920** 2. Name of Corporation **Plainfield Auto Sales, Inc.**

3. Street Address Principal Business Office **292 Plainfield Street** City **Providence** State **RI** Zip **02909**
4. Business Phone No. **(401) 943-7666** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3335**

7. Brief Description of the Character of Business Conducted in Rhode Island

Selling of used automobiles.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Joseph Pisaturo	Vice President Name Vincent Pisaturo
Street Address 292 Plainfield Street	Street Address 292 Plainfield Street
City State Zip Providence RI 02909	City State Zip Providence RI 02909
Secretary Name Joseph Pisaturo	Treasurer Name Vincent Pisaturo
Street Address (same as above)	Street Address (same as above)
City State Zip Providence RI 02909	City State Zip Providence RI 02909

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
500 SHS NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
None

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



* 8 0 9 2 0 *

File Date: 6-14-01

Check No.: 3407

By: DA

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.

Joseph Pisaturo 6/7/01
Signature of Officer Date

Joseph Pisaturo

Print or Type Name of Officer

President

Title of Officer



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. **80920** 2. Name of Corporation **Plainfield Auto Sales, Inc.**
3. Street Address Principal Business Office **292 Plainfield Street** City **Providence** State **RI** Zip **02909**
4. Business Phone No. **(401) 943-7666** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3335**
7. Brief Description of the Character of Business Conducted in Rhode Island
Selling of used automobiles.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Joseph Pisaturo	Vice President Name Vincent Pisaturo
Street Address 292 Plainfield Street	Street Address 292 Plainfield Street
City Providence State RI Zip 02909	City Providence State RI Zip 02909
Secretary Name (same as above)	Treasurer Name
Street Address	Street Address
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
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
500 SHS NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
None

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



* 8 0 9 2 0 *

File Date: **FILED**
Check No.: **MAR 29 2000**
By: **OC 3184**
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 **Joseph Pisaturo** Date
Print or Type Name of Officer
President
Title of Officer



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

(FORM MUST BE FILED IN BLOCK)

1. Corporate ID No. **80920** 2. Name of Corporation **Plainfield Auto Sales, Inc.**

3. Street Address Principal Business Office. **292 Plainfield Street** City **Providence** State **RI** Zip **02909**
4. Business Phone No. **(401) 943-7666** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3335**

7. Brief Description of the Character of business Conducted in Rhode Island
Selling of used automobiles.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Joseph Pisaturo	Vice President Name Vincent Pisaturo
Street Address 292 Plainfield Street	Street Address 292 Plainfield Street
City State Zip Providence RI 02909	City State Zip Providence RI 02909
Treasurer Name (same as above)	Treasurer Name (same as above)
Street Address	Street Address
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
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
500 SHS NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
NONE

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



* 8 0 9 2 0 *

File Date: 04-07-99

Check No.: 3014

By: JJD

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 Joseph Pisaturo Date _____
Print or Type Name of Officer **JOSEPH PISATURO**
Title of Officer **PRESIDENT**



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **80920** 2. Name of Corporation **Plainfield Auto Sales, Inc.**
3. Street Address Principal Business Office
292 Plainfield Street
4. Business Phone No. **(401) 943-7666** 5. State of Incorporation **RHODE ISLAND**
7. Brief Description of the Character of Business Conducted in Rhode Island
Selling of used automobiles

City **Providence** State **RI** Zip **02909**
6. SIC Code **3335**

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name **Joseph Pisaturo**
Street Address **292 Plainfield Street**
City **Providence** State **RI** Zip **02909**
Secretary Name **Joseph Pisaturo**
Street Address **(same as above)**
City **Providence** State **RI** Zip **02909**

Vice President Name **Vincent Pisaturo**
Street Address **292 Plainfield Street**
City **Providence** State **RI** Zip **02909**
Treasurer Name **Vincent Pisaturo**
Street Address **(same as above)**
City **Providence** State **RI** Zip **02909**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name **NONE**
Street Address
City State Zip
Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip
Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
500 SHS NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
NONE

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



File Date: 3.23.98
Check No.: 2821
By: [Signature]
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] 1/23/98
Signature of Officer Date
Vincent Pisaturo
Print or Type Name of Officer
Vice President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT 1997
Filing Period: January 1-March 1 • Filing Fee: \$50.00

FORM MUST BE TYPED IN BLACK

1. Corporate ID No. **80920** 2. Name of Corporation **Plainfield Auto Sales, Inc.**

3. Street Address Principal Business Office **292 Plainfield Street** City **Providence** State **RI** Zip **02909**

4. Business Phone No. **(401)943-7666** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3336**

7. Brief Description of the Character of Business Conducted in Rhode Island

Selling of Used Automobiles

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name Joseph Pisaturo	Vice President Name Vincent Pisaturo
Street Address 292 Plainfield Street	Street Address 292 Plainfield Street
City State Zip Providence RI 02909	City State Zip Providence RI 02909

Secretary Name Joseph Pisaturo	Treasurer Name Vincent Pisaturo
Street Address Same as above	Street Address Same as above
City State Zip Providence RI 02909	City State Zip Providence RI 02909

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name NONE	Director Name
Street Address	Street Address
City State Zip	City State Zip

Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 SHS NO PAR VALUE			NONE		

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



File Date: 3/20/97

Check No.: 2582

By: [Signature]

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] 1/14/97
Signature of Officer Date

Vincent Pisaturo
Print or Type Name of Officer

Vice President
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode 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: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 80920 2. NAME OF CORPORATION Plainfield Auto Sales, Inc.

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 292 Plainfield Street CITY Providence STATE RI ZIP CODE 02909

4. BUSINESS PHONE NO. (401) 943-7666 5. STATE OF INCORPORATION RHODE ISLAND 6. SIC CODE 3335

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND

Selling of used automobiles

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME <u>Joseph Pisaturo</u>			VICE PRESIDENT NAME <u>Vincent Pisaturo</u>		
STREET ADDRESS <u>292 Plainfield Street</u>			STREET ADDRESS <u>292 Plainfield Street</u>		
CITY <u>Providence</u>	STATE <u>RI</u>	ZIP CODE <u>02909</u>	CITY <u>Providence</u>	STATE <u>RI</u>	ZIP CODE <u>02909</u>
SECRETARY NAME <u>Joseph Pisaturo</u>			TREASURER NAME <u>Vincent Pisaturo</u>		
STREET ADDRESS <u>Same as above</u>			STREET ADDRESS <u>Same as above</u>		
CITY <u>Providence</u>	STATE <u>RI</u>	ZIP CODE <u>02909</u>	CITY <u>Providence</u>	STATE <u>RI</u>	ZIP CODE <u>02909</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME <u>NONE</u>			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
500 SHS	NO PAR VALUE		NONE		

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.

File Date:

6/18/96

Check No:

2314

By:

CC

For Secretary of State Use Only

Signature of Officer

VINCENT PISATURO
Print or Type Name of Officer

Vice President
Title of Officer

6/7/96

Date

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

Corporate ID: 0060920 Annual Report for the year: 1995

Name of Corporation: Plainfield Auto Sales, Inc.

Business entity organized under the laws of the State of: RI
 For foreign entity, address and telephone number of principal office:

 Business Entity is (check one):
 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 business entity in Rhode Island (Provide street address - Not P.O. Box):
292 Plainfield Street
Providence, Rhode Island
 Phone: (401) 943-7666
 Brief statement of the character of business conducted in Rhode Island:
Sell Used Vehicles

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>Joseph Pisaturo</u>	<u>60 Park Forest Road</u>	<u>Cranston, RI</u>	<u>02920</u>
VICE PRESIDENT <u>Vincent Pisaturo</u>	<u>25 Dean Parkway</u>	<u>Cranston, RI</u>	<u>02920</u>
SECRETARY			
TREASURER			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Vincent Pisaturo</u>	<u>280 Plainfield Street</u>	<u>Providence, Rhode Island</u>	
<u>Joseph Pisaturo</u>	<u>280 Plainfield Street</u>	<u>Providence, Rhode Island</u>	

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
<u>500</u>	<u>No Par Common</u>		

Date Jul 27 1995 By: Vincent Pisaturo
 PRINT OR TYPE NAME OF OFFICER SIGNING V. Pisaturo
 TITLE OF OFFICER SIGNING _____
 Form 3 1-95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

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

VINCENT PISATURO
 292 PLAINFIELD STREET
 PROVIDENCE RI 02909

PAID
 APR 21 1995
 TP 2070
 SECRETARY OF STATE