



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

PO CK# 12220

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

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. 62527		2. Name of Corporation SASA Enterprize, Inc.		
3. Street Address Principal Business Office 550 ATWOOD AVE		City CRANSTON	State RI	Zip 02920
4. Business Phone No.		5. State of Incorporation RHODE ISLAND		6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island AUTO SALES BODY AND SERVICE				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Mohamad Yaser SASA		Vice President Name RHONDA A. SASA		
Street Address 40 HOPKINS AVE		Street Address 40 HOPKINS AVE		
City JOHNSTON	State R.I	Zip 02919	City JOHNSTON	State R.I
Secretary Name RHONDA A. SASA		Treasurer Name MOHAMAD YASER SASA		
Street Address 40 HOPKINS AVE		Street Address 40 HOPKINS AVE		
City JOHNSTON	State R.I	Zip 02919	City JOHNSTON	State R.I
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
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
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
100 NO PAR VALUE	A	1.00	NONE	

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



File Date	FILED
Check No	March 7 2005
By	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 of Officer: [Signature] Date: 1-17-05
Print or Type Name of Officer: MOHAMAD YASER SASA
Title of Officer: President



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 62527		2. Name of Corporation SASA Enterprize, Inc.		
3. Street Address Principal Business Office 550 Atwood Ave		City CRANSTON	State R.I.	Zip 02920
4. Business Phone No (401) 946-5543 - 943 6611		5. State of Incorporation RHODE ISLAND		6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island AUTO SALES BODY AND SERVICE				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Mohamad Yaser Sasa		Vice President Name RHONDA A. SASA		
Street Address 40 Hopkins Ave		Street Address 40 Hopkins Ave		
City JOHNSTON	State RI	Zip 02919	City JOHNSTON	State RI
Secretary Name RHONDA A. SASA		Treasurer Name Mohamad Yaser Sasa		
Street Address 40 Hopkins Ave		Street Address 40 Hopkins Ave		
City JOHNSTON	State RI	Zip 02919	City JOHNSTON	State RI
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
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES				
Number of Shares		Class/Series	Par Value	
100 NO PAR VALUE		A	1.00	
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES				
Number of Shares		Class/Series	Par Value	
100 NO PAR VALUE		A	1.00	

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



* 6 2 5 2 7 *

File Date	1-16-04
Check No.	11510
By:	
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.

Mohamad Yaser Sasa 1-16-04
Signature of Officer Date
Mohamad Yaser Sasa
Print or Type Name of Officer
President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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.

62527

2. Name of Corporation

SASA Enterprize, Inc.

3. Street Address Principal Business Office

550 Atwood Avenue

City

Cranston

State

RI

Zip

02920

4. Business Phone No.

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5538

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

AUTO SALES, AUTO BODY AND SERVICE

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Mohamad Yaser SASA

Vice President Name

Rhonda A. SASA

Street Address

40 Hopkins Ave.

Street Address

40 Hopkins Ave.

City

Johnston

State

RI

Zip

02919

City

Johnston

State

RI

Zip

02919

Secretary Name

Rhonda A. SASA

Treasurer Name

Mohamad Yaser Sasa

Street Address

40 Hopkins Ave.

Street Address

40 Hopkins Ave.

City

Johnston

State

RI

Zip

02919

City

Johnston

State

R.I

Zip

02919

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

100 NO PAR VALUE

A

1.00

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

A

1.00

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



* 6 2 5 2 7 *

File Date:

2/12/03

Check No.:

10767

By:

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

Date

Mohamad Yaser Sasa

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PJ CLK# 9682 12-28-01



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. 2. Name of Corporation

62527

SASA Enterprize, Inc.

3. Street Address Principal Business Office

550 ATWOOD Ave

4. Business Phone No.

(401) 946-5543

5. State of Incorporation

RHODE ISLAND

City

CRANSTON

State

R.I

Zip

02920

6. SIC Code

5538

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

AUTO Sales, Body, and service

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

MOHAMAD YASER SASA

RHONDA A. SASA

Street Address

Street Address

40 Hopkins Ave

40 Hopkins Ave

City

City

JOHNSTON

State

R.I

Zip

02919

State

R.I

Zip

02919

Secretary Name

Treasurer Name

RHONDA A. SASA

MOHAMAD YASER SASA

Street Address

Street Address

40 Hopkins Ave

40 Hopkins Ave

City

City

JOHNSTON

State

R.I

Zip

02919

State

R.I

Zip

02919

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

City

State

State

Zip

Zip

Director Name

Director Name

Street Address

Street Address

City

City

State

State

Zip

Zip

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

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

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

100 NO PAR VALUE

A

1.00

NONE

0.00

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



* 6 2 5 2 7 *

File Date: 1-8-02

Check No.: 9692

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 of Officer: [Signature] Date: 12-28-01

MOHAMAD YASER SASA

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

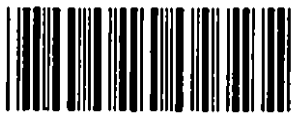
(FORM MUST BE TYPED IN BLACK)

PJ CK # 9476



1. Corporate ID No. 62527		2. Name of Corporation SASA Enterprize, Inc.	
3. Street Address Principal Business Office 550 ATWOOD AVE		City CRANSTON	State R.I.
4. Business Phone No. (401) 946-5543		5. State of Incorporation RHODE ISLAND	6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island Auto Sales, Body, and service			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name MOHAMAD YASER SASA		Vice President Name RHONDA A. SASA	
Street Address 40 HOPKINS AVE		Street Address 40 HOPKINS AVE	
City JOHNSTON	State R.I.	City JOHNSTON	State R.I.
Zip 02919		Zip 02919	
Secretary Name RHONDA A. SASA		Treasurer Name MOHAMAD YASER SASA	
Street Address 40 HOPKINS AVE		Street Address 40 HOPKINS AVE	
City JOHNSTON	State R.I.	City JOHNSTON	State R.I.
Zip 02919		Zip 02919	
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 NONE	
Street Address NONE		Street Address NONE	
City NONE	State NONE	City NONE	State NONE
Zip NONE		Zip NONE	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			
AUTHORIZED SHARES			
Number of Shares 100 SHS NO PAR VAL	Class/Series A	Par Value 1.00	
ISSUED SHARES			
Number of Shares NONE	Class/Series	Par Value	

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



* 6 2 5 2 7 *

File Date: **10-1-01**
Check No.: **9476**
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 of Officer: **[Signature]** Date: **9-24-01**
Print or Type Name of Officer: **MOHAMAD YASER SASA**
Title of Officer: **President**



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. 62527 2. Name of Corporation SASA Enterprize, Inc.

3. Street Address Principal Business Office 550 ATWOOD AVE City CRANSTON State R.I Zip 02920
4. Business Phone No. (401) 946-5543 5. State of Incorporation RHODE ISLAND 6. SIC Code 5538
3335

7. Brief Description of the Character of Business Conducted in Rhode Island 'Automotive' Sales, Body, and service

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

President Name Mohamad Yaser Sasa Vice President Name Rhonda Ann Sasa
Street Address 40 HOPKINS AVE Street Address 40 HOPKINS AVE
City JOHNSTON State R.I Zip 02929 City JOHNSTON State R.I Zip 02929
Secretary Name Rhonda Ann Sasa Treasurer Name Mohamad Yaser Sasa
Street Address 40 HOPKINS AVE Street Address 40 HOPKINS AVE
City JOHNSTON State R.I Zip 02919 City JOHNSTON State R.I Zip 02919

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

Director Name Mohamad Yaser Sasa Director Name Rhonda Ann Sasa
Street Address 40 HOPKINS AVE Street Address 40 HOPKINS AVE
City JOHNSTON State R.I Zip 02919 City JOHNSTON State R.I Zip 02919
Director Name NONE Director Name NONE
Street Address NONE Street Address NONE
City City State State Zip Zip

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
100 SHS NO PAR VAL	A	1.00

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
100	A	1.00

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



* 6 2 5 2 7 *

File Date: 12-24-99
Check No.: 7321
By: AMF

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.

Mohamad Yaser Sasa 12-22-99
Signature of Officer Date
Mohamad Yaser Sasa
Print or Type Name of Officer
President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _____

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 62527 2. Name of Corporation SASA ENTERPRIZE, INC.
3. Street Address Principal Business Office 550 ATWOOD AVE City CRANSTON State RI Zip 02920
4. Business Phone No. (401) 946-5543 5. State of Incorporation R.I. 6. SIC Code _____

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

AUTO. Sales, Body Service and CAR WASHING facility

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

President Name <u>MOHAMAD YASER SASA</u> Street Address <u>40 HOPKINS AVE JO</u> City <u>JOHNSTON</u> State <u>RI</u> Zip <u>02919</u>	Vice President Name <u>MOHAMAD YASER SASA</u> Street Address <u>40 HOPKINS AVE</u> City <u>JOHNSTON</u> State <u>RI</u> Zip <u>02919</u>
Secretary Name <u>MOHAMAD YASER SASA</u> Street Address <u>40 HOPKINS AVE</u> City <u>JOHNSTON</u> State <u>RI</u> Zip <u>02919</u>	Treasurer Name <u>MOHAMAD YASER SASA</u> Street Address <u>40 HOPKINS AVE</u> City <u>JOHNSTON</u> State <u>RI</u> Zip <u>02919</u>

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

Director Name _____ 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
<u>100</u>	<u>A</u>	<u>1.00</u>

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<u>100</u>	<u>A</u>	<u>1.00</u>

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

FILED

File Date: JUN 28 1999

Check No.: By 62527

By: _____

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 MOHAMAD YASER SASA Date 6/28/99

Print or Type Name of Officer MOHAMAD YASER SASA

Title of Officer President



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



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. 2. Name of Corporation

62527

SASA ENTERPRIZE, INC.

3. Street Address Principal Business Office

550 Atwood Ave

4. Business Phone No.

(401) 946-5543

5. State of Incorporation

CRANSTON

R.I.

Zip

02920

6. SIC Code

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

AUTO Sales, Auto Body, Auto CARWASH, Rental, leasing and service.

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

President Name

MOHAMAD YASER SASA

Vice President Name

Street Address

40 Hopkins Ave

Street Address

City

State

Zip

JOHNSTON

R.I.

02919

City

State

Zip

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)

Director Name

MOHAMAD YASER SASA

Director Name

Street Address

40 Hopkins Ave

Street Address

City

State

Zip

JOHNSTON

R.I.

02919

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

100

Class/Series

A

Par Value

1.00

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

ISSUED SHARES

Number of Shares

100

Class/Series

A

Par Value

1.00

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

FILED

AUG 06 1998

File Date:

By

Check No.:

By:

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

Date

MOHAMAD YASER SASA

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



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. 2. Name of Corporation

62527

SASA Enterprize, Inc.

3. Street Address Principal Business Office

1393 Plainfield Street

City

Johnston

State

RI

Zip

02919

4. Business Phone No.

(401) 946-2591

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5538

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

Real Estate Rental

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

President Name

Mohamad Y. Sasa

Vice President Name

Bachar Sasa

Street Address

40 Hopkins Avenue

Street Address

83 Deerfield Drive

City

Johnston

State

RI

Zip

02919

City

West Warwick

State

RI

Zip

02893

Secretary Name

Mohamad Y. Sasa

Treasurer Name

Bachar Sasa

Street Address

40 Hopkins Avenue

Street Address

83 Deerfield Drive

City

Johnston

State

RI

Zip

02919

City

West Warwick

State

RI

Zip

02893

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

Director Name

Mohamad Y. Sasa

Director Name

Bachar Sasa

Street Address

40 Hopkins Avenue

Street Address

83 Deerfield Drive

City

Johnston

State

RI

Zip

02919

City

West Warwick

State

RI

Zip

02893

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

Number of Shares

Class/Series

Par Value

100 SHS NO PAR VAL

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

None

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



* 6 2 5 2 7 *

File Date: 3/7/97

Check No.: 1019

By: [Signature] 3/8/97

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] 3/6/97
Signature of Officer Date

MOHAMAD YASER SASA
Print or Type Name of Officer

President
Title of Officer

PROFIT CORPORATON ANNUAL REPORT

1996

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



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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO 0062527		2. NAME OF CORPORATION Sasa Enterprize, Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 1393 Plainfield Street		CITY Johnston	STATE RI
4. BUSINESS PHONE NO. (401) 946-2591		5. STATE OF INCORPORATION Rhode Island	6. SIC CODE 5538
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Real Estate Rental			

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME Mohamad Y. Sasa			VICE PRESIDENT NAME Bachar Sasa		
STREET ADDRESS 40 Hopkins Avenue			STREET ADDRESS 83 Deerfield Drive		
CITY Johnston	STATE RI	ZIP CODE 02919	CITY West Warwick	STATE RI	ZIP CODE 02893
SECRETARY NAME Mohamad Y. Sasa			TREASURER NAME Bachar Sasa		
STREET ADDRESS 40 Hopkins Avenue			STREET ADDRESS 83 Deerfield Drive		
CITY Johnston	STATE RI	ZIP CODE 02919	CITY Johnston	STATE RI	ZIP CODE 02893

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME Mohamad Y. Sasa			DIRECTOR NAME Bachar Sasa		
STREET ADDRESS 40 Hopkins Avenue			STREET ADDRESS 83 Deerfield Drive		
CITY Johnston	STATE RI	ZIP CODE 02919	CITY West Warwick	STATE RI	ZIP CODE 02893
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
100	Common	Without Par	100	Common	Without Par

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.

[Signature]
Signature of Officer

Mohamad Y. Sasa
Print or Type Name of Officer

President
Title of Officer

6-26-96
Date

File Date: 6/27/96
Check No: 1008
By: *[Signature]*
For Secretary of State Use Only

Corporate ID: 0062527 Annual Report for the year 1995

Name of Business Entity: SASA Enterprize, Inc.

Business entity organized under the laws of the State of: Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

Foreign entity, address and telephone number of principal office:

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

1393 Plainfield Street

Johnston, RI 02919

(401) 944-9930

Business Entity is (check one):

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed

Mohamad Y. Sasa, President

1393 Plainfield Street

Johnston, RI 02919

Brief statement of the character of business conducted in Rhode Island

Real estate rental

Date of Organization: 11/26/90

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

OFFICER EXECUTIVE OFFICER OR ☒ PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE

Mohamad Y. Sasa 40 Hopkins Avenue Johnston, RI 02919

OFFICER OPERATING OFFICER OR ☒ VICE PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE

Char Sasa 83 Deerfield Drive West Warwick, RI 02893

OFFICER SECRETARY (Check One) STREET ADDRESS CITY/STATE ZIP CODE

Mohamad Y. Sasa 40 Hopkins Avenue Johnston, RI 02919

OFFICER FINANCIAL OFFICER OR ☒ TREASURER (Check One) STREET ADDRESS CITY/STATE ZIP CODE

Char Sasa 83 Deerfield Drive West Warwick, RI 02893

THE NAMES OF THE DIRECTORS ARE:

STREET ADDRESS CITY/STATE ZIP CODE

Mohamad Y. Sasa 40 Hopkins Avenue Johnston, RI 02919

STREET ADDRESS CITY/STATE ZIP CODE

Char Sasa 83 Deerfield Drive West Warwick, RI 02893

STREET ADDRESS CITY/STATE ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 100

CLASS Common

SERIES

PAR VALUE OR Without Par

WITHOUT PAR

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 100

CLASS Common

SERIES

PAR VALUE OR Without Par

WITHOUT PAR

4/17 1995

By: Mohamad Y. Sasa

Mohamad Y. Sasa

PRINT OR TYPE NAME OF OFFICER SIGNING

President

TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

MOHAMAD YASER SASA
1393 PLAINFIELD STREET
JOHNSTON RI 02919

FILED

MAY 01 1995

By: CC 745

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 00000000 62527 Annual Report for the year: 12/31/94

Name of Business Entity: Sasa Enterprise, Inc.

Business entity organized under the laws of the State of: RI

Federal Taxpayer Identification Number: 00000000

For foreign entity, address and telephone number of principal office:

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)

1393 Plainfield Street
Johnston, RI 02919

Phone: (401) 946-2591

Business Entity is (check one):

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Mohamad Y. Sasa, President
1393 Plainfield Street
Johnston, RI 02919

Brief statement of the character of business conducted in Rhode Island:
Real Estate

Date of Organization: 11/26/90

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One) <u>Mohamad Y. Sasa</u>	<u>40 Hopkins Avenue</u>	<u>Johnston, RI</u>	<u>02919</u>
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One) <u>Bachar Sasa</u>	<u>40 Hopkins Avenue</u>	<u>Johnston, RI</u>	<u>02919</u>
<input type="checkbox"/> CLERK OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One) <u>Bachar Sasa</u>	<u>40 Hopkins Avenue</u>	<u>Johnston, RI</u>	<u>02919</u>
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One) <u>Mohamad Y. Sasa</u>	<u>40 Hopkins Avenue</u>	<u>Johnston, RI</u>	<u>02919</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Mohamad Y. Sasa</u>	<u>40 Hopkins Avenue</u>	<u>Johnston, RI</u>	<u>02919</u>
<u>Bachar Sasa</u>	<u>40 Hopkins Avenue</u>	<u>Johnston, RI</u>	<u>02919</u>

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 100

CLASS Common

SERIES

PAR VALUE OR
WITHOUT PAR Without Par

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 100

CLASS Common

SERIES

PAR VALUE OR
WITHOUT PAR Without Par

Date October 13, 1994

By: Mohamad Y. Sasa

Mohamad Y. Sasa
PRINT OR TYPE NAME OF OFFICER SIGNING

President
TITLE OF OFFICER SIGNING

Form 31 1/94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

FILED
OCT 14 1994
BY 1659004
3329

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0052527 Annual Report for the year 1993

FIRST: The name of the corporation is SASA Enterprize, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Import, Export

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 1393 Plainfield Street
Johnston RI 02919

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Mohamad Yaser SASA President

Vice President

Secretary

Treasurer

170

40 Hopkins Ave Johnston RI 02919

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

100

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

Dated Feb 24 19 93

SASA Enterprize INC.
(Name of Corporation)

By Mohamad Yaser SASA

Title PRESIDENT

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 62527 05-0465523

Annual Report for the year 1992

FIRST: The name of the corporation is SASA ENTERPRISES, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is Retail, wholesale, Import & Export

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 1393 Plainfield St
JOHNSTON, R.I. 02919

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

MOHAMAD YASER SASA Director

40 HOPKINS AVE JOHNSTON, RI 02919

Director

Director

MOHAMAD YASER SASA President

40 HOPKINS AVE JOHNSTON, RI 02919

Vice President

Secretary

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

100

PAID

DEC 3 1992

Par Value
or statement that
shares are without
par value

1.00

EIGHTH: Number of Shares issued:

SECRETARY OF STATE

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

Dated Nov 27 1992

SASA Enterprises, Inc.
(Name of Corporation)

By Mohamad Yaser Sasa

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0062527 Annual Report for the year 1991

FIRST: The name of the corporation is EX & SON INC.

SECOND: It is incorporated under the laws of _____

THIRD: Character of business, briefly stated, is Gasoline + Diesel + Home Heating oil
Wholesale Distributor

FOURTH: If foreign corporation, address of its principal office _____

FIFTH: Business address in Rhode Island 1393 Plainfield - St
JOHNSTON, R.I. 02919

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>MOHAMAD YASER SASA</u>	<u>Director</u>	<u>116 INMAN AVE WARWICK R.I. 02880</u>
<u>Same</u>	<u>Director</u>	
<u>Same</u>	<u>Director</u>	
<u>Same</u>	<u>President</u>	
<u>Same</u>	<u>Vice President</u>	
<u>Same</u>	<u>Secretary</u>	
<u>Same</u>	<u>Treasurer</u>	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series
<u>100</u>		

Par Value
or statement that
shares are without
par value

PAID

JAN 08 1991

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series
<u>100</u>		

SECY OF STATE
Par Value
or statement that
shares are without
par value

Dated Dec 4 1991

EX & SON, INC.
(Name of Corporation)

By Mohamad Yaser Sasa
Title President

(an officer)