

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

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 2005

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation NNC of RI, INC. 115733 3. Street Address Principal Business Office State Zip WEST BRIDGWATER 790 NORTH MAIN STREET MA 02379-4. Business Phone No 5. State of Incorporation 6. SIC Code 5085866400 RHODE ISLAND 8896 7. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE A CAR WASH ¢ 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name James M. Deeb .Michael G. Deeb Street Address Street Address 2321 Fieldstone Drive .406 Plymouth Street City State City Zip State North Dighton MA Halifax MA 02338 Secretary Name Treasurer Name Michael G. Deeb Michael G. Deeb Street Address Street Address 406 Plymouth Street 406 Plymouth Street City State Zıp *City State Zip Halifax MA 02338 Halifax MA 02338 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 Zıp City State Zıp Director Name Director Name Street Address ·Street Address City State City 7.10 Zip State 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 8.000 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. *115733 DBC 02/停机563-29:39 PM* File Date Date Check No. James M∴Deeb Print or Type Name of Officer President FOR SECRETARY OF STATE USE ONLY Title of Officer Form 630 12/01



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

3. 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 - Mo FORM MUST BE TYPED OR PRIN		Fee: \$50.00					
. Corporate ID No.	2 Name of Corporation						
115733	NNC of RI, INC.						
3. Street Address Principal Business C	~		City	State	Zip		
790 North Main S	Street	I S Server of the component of	West Bridgwater	MA	02379 6. SIC Code		
1. Business Phone No. (508) 586-6400		5. State of Incorporation					
7. Brief Description of the Character of	of Rusiness Conducted in 6	RHODE ISLANI	<u>n</u>		8896		
TO OPERATE A CAR W	ASH		TACHMENT) FILL IN SPA	ACES BEFÖRE USIN	G ATTACHMENTS		
President Name			Vice President Name				
James M. Deeb			Michael G. Deeb	Michael G. Deeb			
Street Address 2321 Fieldstone	Drive		Sirver Address 406 Plymouth Street				
Cin	State	Ζφ	City	State	Zip		
North Dighton Secretary Name	MA	.1	Halifax Treasurer Name	MA	02338		
Michael G. Deeb			Michael G. Deeb				
Street Address	<u>. </u>		Street Address				
406 Plymouth Sti	reet		406 Plymouth Sti	reet			
City	State	Zip	City	State	Zip		
Halifax	MA	02338	Halifax	MA	02338		
9. NAMES AND ADDRESSES Director Name N/A	OF THE DIRECTOR	RS: ("X" BOX FOR A	ATTACHMENT)	SPACES BEFORE US	SING ATTACHMENTS		
Street Address			Street Address	Street Address			
City	State	Ζφ	City	State	Zip		
Director Name	.J	J	Director Name	l			
Street Address		Street Address					
City	State	Zip	City	State	Zip		
10. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED ("X	 X" BOX FOR ATTAC	 CHMENT)		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value		
8,000 NO PAR VALUE			none				
	-						
File Date 3/17/04 Check No. 1526 By:	signed in ink by eith	ner the President, Vic	sincluding any accompany contained herein are transfer of Officer James M. Der Print or Type Name of Officer	ary. I declare and affirm anying schedules and s uc and correct.	n that bhave examined this reports and that all statements.		
FOR SECRETARY OF ST	TATE USE ONLY		President Title of Officer				
		_	tine of Officer		Form 630 Rev. 12/03		



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

. Corporate ID No. *115733*	2. Name of Cor NNC of RI						
3. Street Address Principal B			City	State	Zip		
790 NORTH MAIN	•		WEST BRIDGWATER	MA	02379-		
1. Business Phone No.		5. State of Incorporate			6. SIC Code		
5085866400		RHODE ISLAN			8896		
	haracter of Rusiness (
Brief Description of the C TO OPERATE A CAR	WASH						
8. NAMES AND ADDR	ESSES OF THE O	FFICERS ("X" BOX FOR	ATTACHMENT) FILL IN SPACE	ES BEFORE USING	ATTACHMENTS		
James M. Deeb			Michael G. Deeb				
Street Address			Street Address				
2321 Fieldstone	Drive		•	. 406 Plymouth Street			
	State	Zip	City	State	Zip		
City N. Dighton	i MA	02764	.Halifax	MA	02338		
Secretary Name			Treasurer Name				
Michael G. Deeb			Michael G. Deeb				
			Street Address				
<i>Street Address</i> 406 Plymouth St:	reet		.406 Plymouth Stre	et			
· — — — — — — — — — — — — — — — — — — —		7:-			†Zin		
Culy Unlifor	State MA	<i>Zip</i> 02338	City Valifax	State	Zip 02338		
Halifax	· .		. Halifax	MA.	and the same of the same of		
	ESSES OF THE D	IRECTORS ("X" BOX FO	PRATTACHMENT) T FILL IN SPA	CES BEFORE USII	IG ATTACHMENTS		
Director Name			Director Name				
			•				
Street Address			·Street Address				
			•				
Cin.	State	Zip	•Ciry	State	Zip		
	1	 	•	j			
Director Name			Director Name		. ,		
			•				
Street Address			·Street Address		·		
			•				
City	State	Zip	City	State	Zip		
	į	1	•	i			
10. SHARES AUTHOR	UZED ("X" BOX FO	OR ATTACHMENT)	11. SHARES ISSUED ("X" B	OX FOR ATTACHM	IENT)		
AUTHORIZED SHARES			JISSUED SHARES				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value		
· —. ————							
8,000 NO PAR VALU	JE.		'0.0040				
·	·		none_	- 			
This report must be si j	gned in ink by ei	ther the President, Vice	President, Secretary, Assista	nt Secretary, Tre	asurer, Receiver or Tru		
1 /82/51 1/58		ı 1 00 1					
* 1	1 5 7 3 3	•			rm that I have examined		
					hedules and statements,		
115733 DBC;1/7/03	32:07:43_PM		and that all statements	contamen nerein are			
2.1	1.03		James 1	n leeb	1-16-03		
File Date	\ \ ` ~ ~ 	-	_//~ //				
12/	J		Signature of Officer	a la	Date		
Thomas III	_	i i	James M. De	en			
Check No. 10 / 2	<u> </u>						
1 1)	_	Print or Type Name of Off		· 		
$B_{Y'}$)	_	Print or Type Name of Off		<u>. </u>		
1 1) ATE USE ONLY	_			Form 630		



Edward S. Inman, 111, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORP	ORATION A	ANNUAL REF	ORT FOR THE	YEAR 2002	TLASE E	
FORM MUST BE TYPED IN BLA	ick)					
. Corporate ID No.	2. Name of Corporation	n	-			
115733	NNC of RI, INC.					
Business Phone No.	ain Street	S. State of Incorporation RHODE ISLAND	W. Bridgewater	- State MA	7.1p 02379 6. SIC Code 8896	
508 586,64. 586.64	V () r of Rusiness Conducted in R	Rhode Island			0010	
Operate Car v	vash		(MENT) FILL IN SPACES BI	EFORE USING ATTAC	HMENTS	
resident Name			Man Grant days Many			
James M. Deeb			Michael G. Deeb Street Address 406 Plymouth Street			
2321 Fieldst	one Drive		406 Plymon	th Street		
Mo Dighton	State MA	02764	Halifex	State M A	2ip 02338	
ecretary Name) MICHOUL G treet Address	Deeb		Michael G, Street Address	Deep		
City	State	Zip	City	State	Zip	
D. NAMES AND ADDRES Director Name	SES OF THE DIREC	CTORS (*X* BOX FOR ATTA	CHMENT) FILL IN SPACES Director Name	BEFORE USING ATTA	CHMENTS	
treet Address			Street Address			
Sity	State	Zip	City	State	Zip	
Director Name			Director Name		٠	
treet Address			Street Address			
City	State	Zip	City	State	Zip	
O. SHARES AUTHORIZE	D ("X" BOX FOR ATTAC	HMENT)	11. SHARES ISSUED (*X'	* BOX FOR ATTACHMENT.)	
lumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	

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

₹> 5



8,000 NO PAR VALUE

File Date:	41/00	
File Date:		
Check No.:	1111	
Ву:	Com_	
FOR SECRETARY	Y OF STATE USE ONLY	

Ferm 630 12/01