



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

**Annual Report for the year:** 2020  
**Corporation**

**FILED STAMP**  
 JAN 23 2020  
 18000

- 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 <span style="border: 1px solid black; padding: 2px;">137585</span>		2. Exact name of the Corporation <span style="border: 1px solid black; padding: 2px;">MANCINI'S SERVICE STATION, INC.</span>	
3. Principal Office Address <span style="border: 1px solid black; padding: 2px;">1191 Hartford Avenue</span>		City <span style="border: 1px solid black; padding: 2px;">Johnston</span>	State <span style="border: 1px solid black; padding: 2px;">RI</span>
		Zip <span style="border: 1px solid black; padding: 2px;">02919</span>	
4. NAICS Code <span style="border: 1px solid black; padding: 2px;">447190</span>	6. Brief description of the character of business conducted in Rhode Island <span style="border: 1px solid black; padding: 2px;">BUYING AND SELLING GASOLINE, PETROLEUM PRODUCTS AND OTHER SUPPLIES OF EVERY KIND AND NATURE RELATING TO MOTOR VEHICLES</span>		
5. State of Incorporation <span style="border: 1px solid black; padding: 2px;">RHODE ISLAND</span>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <span style="border: 1px solid black; padding: 2px;">Agnes A. Mancini</span>		Vice-President Name <span style="border: 1px solid black; padding: 2px;">Anthony G. Mancini</span>	
Street Address <span style="border: 1px solid black; padding: 2px;">69 Orchard Meadows Drive</span>		Street Address <span style="border: 1px solid black; padding: 2px;">266 Scituate Avenue</span>	
City <span style="border: 1px solid black; padding: 2px;">Smithfield</span>	State <span style="border: 1px solid black; padding: 2px;">RI</span>	City <span style="border: 1px solid black; padding: 2px;">Cranston</span>	State <span style="border: 1px solid black; padding: 2px;">RI</span>
Zip <span style="border: 1px solid black; padding: 2px;">02917</span>		Zip <span style="border: 1px solid black; padding: 2px;">02921</span>	
Secretary Name <span style="border: 1px solid black; padding: 2px;">Agnes A. Mancini</span>		Treasurer Name <span style="border: 1px solid black; padding: 2px;">Agnes A. Mancini</span>	
Street Address <span style="border: 1px solid black; padding: 2px;">69 Orchard Meadows Drive</span>		Street Address <span style="border: 1px solid black; padding: 2px;">69 Orchard Meadows Drive</span>	
City <span style="border: 1px solid black; padding: 2px;">Smithfield</span>	State <span style="border: 1px solid black; padding: 2px;">RI</span>	City <span style="border: 1px solid black; padding: 2px;">Smithfield</span>	State <span style="border: 1px solid black; padding: 2px;">RI</span>
Zip <span style="border: 1px solid black; padding: 2px;">02917</span>		Zip <span style="border: 1px solid black; padding: 2px;">02917</span>	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <span style="border: 1px solid black; padding: 2px;"></span>		Director Name <span style="border: 1px solid black; padding: 2px;"></span>	
Street Address <span style="border: 1px solid black; padding: 2px;"></span>		Street Address <span style="border: 1px solid black; padding: 2px;"></span>	
City <span style="border: 1px solid black; padding: 2px;"></span>	State <span style="border: 1px solid black; padding: 2px;"></span>	City <span style="border: 1px solid black; padding: 2px;"></span>	State <span style="border: 1px solid black; padding: 2px;"></span>
Zip <span style="border: 1px solid black; padding: 2px;"></span>		Zip <span style="border: 1px solid black; padding: 2px;"></span>	
Director Name <span style="border: 1px solid black; padding: 2px;"></span>		Director Name <span style="border: 1px solid black; padding: 2px;"></span>	
Street Address <span style="border: 1px solid black; padding: 2px;"></span>		Street Address <span style="border: 1px solid black; padding: 2px;"></span>	
City <span style="border: 1px solid black; padding: 2px;"></span>	State <span style="border: 1px solid black; padding: 2px;"></span>	City <span style="border: 1px solid black; padding: 2px;"></span>	State <span style="border: 1px solid black; padding: 2px;"></span>
Zip <span style="border: 1px solid black; padding: 2px;"></span>		Zip <span style="border: 1px solid black; padding: 2px;"></span>	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES <span style="border: 1px solid black; padding: 2px;">600</span>	CLASS/SERIES <span style="border: 1px solid black; padding: 2px;">COMMON</span>
			PAR VALUE <span style="border: 1px solid black; padding: 2px;">NO PAR VALUE</span>
		<span style="border: 1px solid black; padding: 2px;"></span>	<span style="border: 1px solid black; padding: 2px;"></span>
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. <b>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.</b>			
Name of Authorized Representative <span style="border: 1px solid black; padding: 2px;">AGNES A. MANCINI</span>		Date <span style="border: 1px solid black; padding: 2px;">January 21, 2020</span>	
Signature of Authorized Representative 		SIGN DOCUMENT HERE	

MAIL TO:  
 Division of Business Services  
 148 W River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov