



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

Annual Report for the year: 2020
Corporation

FILED

JAN 29 2020

BY 22910 OS

- 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 82637		2. Exact name of the Corporation Dunn's Corners Repair, Inc				
3. Principal Office Address 260 Post Road			City Westerly	State RI	Zip 02891	
4. NAICS Code 332710		6. Brief description of the character of business conducted in Rhode Island ...TOMOBILE REPAIR AND SALE OF AUTOMOBILE REPAIR PARTS AND ACCESSORIES				
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 Ronald G. Fusaro			Vice-President Name NONE			
Street Address P.O. Box 1481			Street Address			
City Westerly	State RI	Zip 02891	City	State	Zip	
Secretary Name Ronald G. Fusaro			Treasurer Name Ronald G. Fusaro			
Street Address P.O. Box 1481			Street Address P.O. Box 1481			
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891	
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
Director Name Ronald G. Fusaro			Director Name			
Street Address P.O. Box 1481			Street Address			
City Westerly	State RI	Zip 02891	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.		NUMBER OF SHARES		CLASS/SERIALS	PAR VALUE	
		100		Common	None	
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. <i>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.</i>						
Name of Authorized Representative Ronald G. Fusaro				Date 1/22/20		
Signature of Authorized Representative 				SIGN DOCUMENT HERE		