



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

JAN 29 2020

BY

1048 DS

1. Entity ID Number 000719749		2. Exact name of the Corporation J & D AUTO SALES, INC.	
3. Principal Office Address 4 Bridal Avenue		City West Warwick	State RI
		Zip 02893	
4. NAICS Code 44120	6. Brief description of the character of business conducted in Rhode Island Auto sales and auto salvage		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Michael Cavanaugh		Vice-President Name Deborah Cavanaugh	
Street Address 4 Bridal Avenue		Street Address 4 Bridal Avenue	
City West Warwick	State RI	City West Warwick	State RI
Zip 02892		Zip 02893	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>			
Director Name Deborah Cavanaugh		Director Name	
Street Address 4 Bridal Avenue		Street Address	
City West Warwick	State RI	City	State
Zip 02893		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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/SERIES	
		PAR VALUE	
		none	
		.01	
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. 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.			
Name of Authorized Representative Michael Cavanaugh		Date 1/27/2020	
Signature of Authorized Representative 		SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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