



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



**FILED**

FEB 24 2020

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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.

BY 23856

1. Entity ID Number <b>000037411</b>		2. Exact name of the Corporation <b>Automotive Engineering Specialties, Inc.</b>									
3. Principal Office Address <b>1173 Warwick Avenue</b>				City <b>Warwick</b>		State <b>RI</b>		Zip <b>02888</b>			
4. NAICS Code <b>811111</b>		6. Brief description of the character of business conducted in Rhode Island <b>Automotive and truck repairs and maintenance</b>									
5. State of Incorporation <b>RI</b>											
7. List ALL officers (names and addresses) <span style="float:right;">Check the box to indicate an attachment</span>											
President Name <b>Diane Plante</b>				Vice-President Name <b>Gregory P. Rameaka</b>							
Street Address <b>1173 Warwick Avenue</b>				Street Address <b>1173 Warwick Avenue</b>							
City <b>Warwick</b>		State <b>RI</b>		Zip <b>02888</b>		City <b>Warwick</b>		State <b>RI</b>		Zip <b>02888</b>	
Secretary Name <b>Diane Plante</b>				Treasurer Name <b>Gregory P. Rameaka</b>							
Street Address <b>1173 Warwick Avenue</b>				Street Address <b>1173 Warwick Avenue</b>							
City <b>Warwick</b>		State <b>RI</b>		Zip <b>02888</b>		City <b>Warwick</b>		State <b>RI</b>		Zip <b>02888</b>	
8. List ALL directors (names and addresses) <span style="float:right;">Check the box to indicate an attachment</span>											
Director Name <b>None</b>				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	
9. Shares Authorized				10. Shares Issued <span style="float:right;">Check the box to indicate an attachment</span>							
This information is currently of record in the Department of State.  Changes require an additional filing.				NUMBER OF SHARES		CLASS/SERIES		PAR VALUE			
				<b>1000</b>		<b>Common</b>		<b>No Par</b>			
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 <b>Gregory P. Rameaka</b>									Date <b>2/20/20</b>		
Signature of Authorized Representative 									SIGN DOCUMENT HERE		