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

Filing Period: January 1 - March 1 • Filing Fee: $50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No	2. Name of Corporation
40953	CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

3. Street Address Principal Business Office	City	State	Zip
30 Walnut Grove Ave	Cranston	RI	02920

4. Business Phone No.	5. State of Incorporation	6. SIC Code
401- 943-3586	RHODE ISLAND	8953

7. Brief Description of the Character of Business Conducted in Rhode Island
AUTO REPAIR

8. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Vice President Name
Dennis Gamba	Sharon Gamba
Street Address: 106 Mourning Dove Dr.	Street Address: 106 Mourning Dove Dr.
City: Saundestown State: RI Zip: 02874	City: Saundestown State: RI Zip: 02874
Secretary Name	**Treasurer Name**
Sharon Gamba	Dennis Gamba
Street Address: 106 Mourning Dove Dr.	Street Address: 106 Mourning Dove Dr.
City: Saundestown State: RI Zip: 02874	City: Saundestown State: RI Zip: 02874

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 Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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*
1,000 COMM NO PAR VALUE			400	common	none

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

[redacted] [redacted]

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.

Sharon Gamba — *Signature of Officer* — *Date*

SHARON GAMBA — *Print or Type Name of Officer*

Vice President — *Title of Officer*

File Date 1-18-05

Check No. 60357

By:

FOR SECRETARY OF STATE USE ONLY

[redacted]

Form 630 Rev. 12/03

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
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 - March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
40953	CRANSTON COLLISION CENTER SALES AND SERVICE, INC.			
3. Street Address Principal Business Office		City	State	Zip
30 Walnut Grove Avenue		Cranston	RI	02920
4. Business Phone No.	5. State of Incorporation			6. SIC Code
401-943-3586	RHODE ISLAND			8953

7. Brief Description of the Character of Business Conducted in Rhode Island
AUTO REPAIR

8. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Street Address	City	State	Zip
Dennis Gamba	106 Mourning Dove Drive	Saunderstown	RI	02874

Vice President Name	Street Address	City	State	Zip
Sharon Gamba	106 Mourning Dove Drive	Saunderstown	RI	02874

Secretary Name	Street Address	City	State	Zip
Sharon Gamba	106 Mouring Dove Drive	Saunderstown	RI	02874

Treasurer Name	Street Address	City	State	Zip
Dennis Gamba	106 Mourning Dove Drive	Saunderstown	RI	02874

9. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000 COMM NO PAR VALUE		

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES

Number of Shares	Class/Series	Par Value
400	Common	None

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

[redacted]

40953

File Date 2/20/04
Check No. 4927
By: 18

FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Sharon Gamba 2.18.04
Signature of Officer *Date*

SHARON GAMBA
Print or Type Name of Officer

Vice President
Title of Officer

Form 630 Rev. 12/03

CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

MINUTES OF THE ANNUAL MEETING OF THE SHAREHOLDERS

An annual meeting of the shareholders of CRANSTON COLLISION CENTER SALES AND SERVICE, INC., was called to order at the office of the corporation on the14thday of January,2004, for the purpose of electing the Officers for the corporation and transacting any other business that may properly come before said meeting.

It appeared that the shareholders were present and had signed a waiver of notice of this meeting, which is annexed hereto.

Upon motion duly made, it was unanimously

VOTED: That the following are hereby elected to be the Officers of the corporation:

President	DENNIS GAMBA
Vice President	SHARON GAMBA
Treasurer	DENNIS GAMBA
Secretary	SHARON GAMBA

VOTED: That all the activities for and on behalf of the corporation by its respective shareholders and/or officers are hereby ratified and confirmed.

VOTED: To adjourn.

DENNIS GAMBA

SHARON GAMBA

CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

WAIVER OF NOTICE

The undersigned, being the shareholders of CRANSTON COLLISION CENTER SALES AND SERVICE, INC., hereby waives notice of the annual meeting of the shareholders to be held at the office of the corporation on the 14th day of January, 2004 for the purpose of electing the Officers for the corporation and transacting any other business that may properly come before said meeting.

DENNIS GAMBA

SHARON GAMBA

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

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 2003

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
40953	CRANSTON COLLISION CENTER SALES AND SERVICE, INC.			
3. Street Address Principal Business Office		City	State	Zip
30 WALNUT GROVE AVENUE		CRANSTON	RI	02920
4. Business Phone No.	5. State of Incorporation			6. SIC Code
4019433586	RHODE ISLAND			8953

7. Brief Description of the Character of Business Conducted in Rhode Island
AUTO REPAIR

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Vice President Name
Dennis Gamba	Sharon Gamba
Street Address: 106 Mourning Dove Dr.	Street Address: 106 Mourning Dove Dr.
City: Saunderstown State: RI Zip: 02874	City: Saunderstown State: RI Zip: 02874
Secretary Name	**Treasurer Name**
Sharon Gamba	Dennis Gamba
Street Address: 106 Mourning Dove Dr.	Street Address: 106 Mourning Dove Dr.
City: Saunderstown State: RI Zip: 02874	City: Saunderstown State: RI Zip: 02874

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 Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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*
1,000	COMM	NO PAR VALUE	400	COMMON	NONE

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

[redacted] [redacted]

40953

*40953 DBC3/7/0[redacted] 32:4[redacted]

FILED

File Date MAR 26 2003

Check No. By CM 36063

By:

FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Sharon Gamba 3/23/03
Signature of Officer *Date*

SHARON GAMBA
Print or Type Name of Officer

Vice President
Title of Officer

Form 630 12/01

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

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

STOP
PLEASE READ INSTRUCTIONS

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1–March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: 40953
2. Name of Corporation: CRANSTON COLLISION CENTER SALES AND SERVICE, INC.
3. Street Address Principal Business Office: 30 Walnut Grove Ave — City: Cranston — State: RI — Zip: 02920
4. Business Phone No.: 401-943-3586
5. State of Incorporation: RHODE ISLAND
6. SIC Code: 8953
7. Brief Description of the Character of Business Conducted in Rhode Island

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name: Dennis Gamba
Street Address: 106 Mourning Dove Dr.
City: Saunderstown State: RI Zip: 02874

Vice President Name: Sharon Gamba
Street Address: 106 Mourning Dove Dr.
City: Saunderstown State: RI Zip: 02874

Secretary Name: Sharon Gamba
Street Address: 106 Mourning Dove Dr.
City: Saunderstown State: RI Zip: 02874

Treasurer Name: Dennis Gamba
Street Address: 106 Mourning Dove Dr.
City: Saunderstown State: RI Zip: 02874

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000 COMM	NO PAR VALUE	

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

Number of Shares	Class/Series	Par Value
400	Common	None

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

[redacted] [redacted]

40953

File Date: 1-14-02

Check No.: 1711

By: DC

FOR SECRETARY OF STATE USE ONLY

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.

Sharon Gamba 1/11/02
Signature of Officer Date

SHARON GAMBA
Print or Type Name of Officer

Vice President
Title of Officer

Form 630 12/01

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

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP
PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: 40953
2. Name of Corporation: CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

3. Street Address Principal Business Office: 30 Walnut Grove Avenue
City: Cranston
State: RI
Zip: 02920

4. Business Phone No.: 401-943-3586
5. State of Incorporation: RHODE ISLAND
6. SOS #: 8953

7. Brief Description of the Character of Business Conducted in Rhode Island: Auto Repair

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name: Dennis Gamba
Street Address: 106 Mourning Dove Drive
City: Saunderstown, State: RI Zip: 02874

Vice President Name: Sharon Gamba
Street Address: 106 Mourning Dove Drive
City: Saunderstown State: RI Zip: 02874

Secretary Name: Sharon Gamba
Street Address: 106 Mourning Dove Drive
City: Saunderstown State: RI Zip: 02874

Treasurer Name: Dennis Gamba
Street Address: 106 Mourning Dove Drive
City: Saunderstown State: RI Zip: 02874

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name: None
Street Address:
City: State: Zip:

Director Name:
Street Address:
City: State: Zip:

Director Name:
Street Address:
City: State: Zip:

Director Name:
Street Address:
City: State: Zip:

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1000 SHS NO PAR COM		

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

Number of Shares	Class/Series	Par Value
400	common	none

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

[redacted] 

File Date: 2/26

Check No.: 255

By: JL

FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Signature of Officer — Date: 2/21/01

Print or Type Name of Officer: SHARON GAMBA

Title of Officer: V. President

CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

MINUTES OF THE ANNUAL MEETING OF THE SHAREHOLDERS

An annual meeting of the shareholders of CRANSTON COLLISION CENTER SALES AND SERVICE, INC., was called to order at the office of the corporation on the 17th day of January, 2001, for the purpose of electing the Officers for the corporation and transacting any other business that may properly come before said meeting.

It appeared that the shareholders were present and had signed a waiver of notice of this meeting, which is annexed hereto.

Upon motion duly made, it was unanimously

VOTED: That the following are hereby elected to be the Officers of the corporation:

President	DENNIS GAMBA
Vice President	SHARON GAMBA
Treasurer	DENNIS GAMBA
Secretary	SHARON GAMBA

VOTED: That all the activities for and on behalf of the corporation by its respective shareholders and/or officers are hereby ratified and confirmed.

VOTED: To adjourn.

DENNIS GAMBA

SHARON GAMBA

CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

WAIVER OF NOTICE

The undersigned, being the shareholders of CRANSTON COLLISION CENTER SALES AND SERVICE, INC., hereby waives notice of the annual meeting of the shareholders to be held at the office of the corporation on the 17th day of January, 2001, for the purpose of electing the Officers for the corporation and transacting any other business that may properly come before said meeting.

DENNIS GAMBA

SHARON GAMBA

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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP
PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation
40953	CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

3. Street Address Principal Business Office	City	State	Zip
30 Walnut Grove Avenue	Cranston	RI	02920

4. Business Phone No.	5. State of Incorporation	6. SIC Code
401-943-3586	RHODE ISLAND	8953

7. Brief Description of the Character of Business Conducted in Rhode Island
Auto Repair

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
Dennis Gamba	106 Mourning Dove Drive	Saunderstown	RI	02874

Vice President Name	Street Address	City	State	Zip
Sharon Gamba	106 Mourning Dove Drive	Saunderstown	RI	02874

Secretary Name	Street Address	City	State	Zip
Sharon Gamba	106 Mourning Dove Drive	Saunderstown	RI	02874

Treasurer Name	Street Address	City	State	Zip
Dennis Gamba	106 Mourning Dove Drive	Saunderstown	RI	02874

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
None				

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

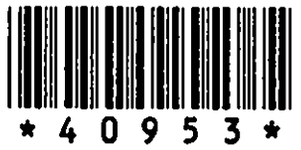
Number of Shares	Class/Series	Par Value
1000 SHS NO PAR COM		

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

Number of Shares	Class/Series	Par Value
400	common	no par

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



File Date: 3/20/00

Check No.: 15292

By: a

FOR SECRETARY OF STATE USE ONLY

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.

✓ [signature] ✓ 3-9-00
Signature of Officer *Date*

✓ DENNIS GAMBA
Print or Type Name of Officer

✓ PRES
Title of Officer

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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

STOP
PLEASE READ INSTRUCTIONS

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1–March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation
40953	CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

3. Street Address Principal Business Office	City	State	Zip
30 Walnut Grove Avenue	Cranston	R.I	02920

4. Business Phone No.	5. State of Incorporation	6. SIC Code
401-943-3586	RHODE ISLAND	8953

7. Brief Description of the Character of Business Conducted in Rhode Island
Auto Repair

8. NAMES AND ADDRESSES OF THE OFFICERS (*"X" BOX FOR ATTACHMENT*) ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Vice President Name
Dennis Gamba	Sharon Gamba
Street Address: 106 Mourning Dove Dr.	Street Address: 106 Mourning Dove DRIVE.
City: Saunderstown State: RI Zip: 02874	City: Saunderstown State: R.I Zip: 02874
Secretary Name	**Treasurer Name**
Sharon Gamba	Dennis GamBA
Street Address: SAME AS ABOVE	Street Address: SAME AS ABOVE
City: State: Zip:	City: State: Zip:

9. NAMES AND ADDRESSES OF THE DIRECTORS (*"X" BOX FOR ATTACHMENT*) ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Director Name
NONE	NONE
Street Address:	Street Address:
City: State: Zip:	City: State: Zip:
Director Name	**Director Name**
Street Address:	Street Address:
City: State: Zip:	City: State: Zip:

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
1000 SHS NO PAR COM			100	Common	No PAR

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

[redacted] * 4 0 9 5 3 * [redacted]

File Date: 1-19-99

Check No.: 13412

By: AMF

FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Sharon Gamba 1.7.99
Signature of Officer Date

SHARON GAMBA
Print or Type Name of Officer

V. President
Title of Officer

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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP
PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation
40953	CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

3. Street Address Principal Business Office	City	State	Zip
30 Walnut Grove Avenue	Cranston	RI	02920

4. Business Phone No.	5. State of Incorporation	6. SIC Code
401-943-3586	Rhode Island	8953

7. *Brief Description of the Character of Business Conducted in Rhode Island*

Auto Repair

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)*

President Name	Street Address	City	State	Zip
DENNIS GAMBA	106 Morning Dove Drive	Saunderstown	RI	02874

Vice President Name	Street Address	City	State	Zip
SHARON GAMBA	106 Morning Dove Drive	Saunderstown	RI	02874

Secretary Name	Street Address	City	State	Zip
SHARON GAMBA	106 Morning Dvoe Drive	Saunderstown	RI	02874

Treasurer Name	Street Address	City	State	Zip
DENNIS GAMBA	106 Morning Dove Drive	Saunderstown	RI	02874

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)*

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

RECEIVED
JUL 21 3 03 PM '98
SECRETARY OF STATE

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1000 SHS	NO PAR COM	

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

Number of Shares	Class/Series	Par Value
400	Common	No Par

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

[redacted]

[redacted]

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.

Sharon Gamba 6.15.98
Signature of Officer *Date*

SHARON GAMBA
Print or Type Name of Officer

V. President
Title of Officer

File Date: 7/21/98

Check No.: 012483

By: KLD

FOR SECRETARY OF STATE USE ONLY

[redacted]

CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

MINUTES OF THE ANNUAL MEETING OF THE SHAREHOLDERS

An annual meeting of the shareholders of CRANSTON COLLISION CENTER SALES AND SERVICE, INC., was called to order at the office of the corporation on the June 15th day of June, 1998, for the purpose of electing the Officers for the corporation and transacting any other business that may properly come before said meeting.

It appeared that the shareholders were present and had signed a waiver of notice of this meeting, which is annexed hereto.

Upon motion duly made, it was unanimously

VOTED That the following are hereby elected to be the Officers of the corporation:

President	DENNIS GAMBA
Vice President	SHARON GAMBA
Treasurer	DENNIS GAMBA
Secretary	SHARON GAMBA

VOTED: That all the activities for and on behalf of the corporation by its respective shareholders and/or officers are hereby ratified and confirmed.

VOTED: To adjourn.

DENNIS GAMBA

SHARON GAMBA

CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

WAIVER OF NOTICE

The undersigned, being the shareholders of CRANSTON COLLISION CENTER SALES AND SERVICE, INC., hereby waives notice of the annual meeting of the shareholders to be held at the office of the corporation on the 15th day of June, 1998, for the purpose of electing the Officers for the corporation and transacting any other business that may properly come before said meeting.

DENNIS GAMBA

SHARON GAMBA

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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

STOP: PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1–March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: 40953

2. Name of Corporation: CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

3. Street Address Principal Business Office: 30 Walnut Grove Ave | City: Cranston | State: RI | Zip: 02920

4. Business Phone No.: 943-3586

5. State of Incorporation: RHODE ISLAND

6. SIC Code: 8953

7. Brief Description of the Character of Business Conducted in Rhode Island: Auto Repair

8. NAMES AND ADDRESSES OF THE OFFICERS (*"X" BOX FOR ATTACHMENT*)

President Name: Dennis Gamba
Street Address: 106 Morning Dove Dr.
City: Saunderstown | State: RI | Zip: 02874

Vice President Name: Sharon Gamba
Street Address: 106 Morning Dove Dr.
City: Saunderstown | State: RI | Zip: 02874

Secretary Name: Sharon Gamba
Street Address: Above
City | State | Zip

Treasurer Name: Dennis Gamba
Street Address: Above
City | State | Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*"X" BOX FOR ATTACHMENT*)

Director Name
Street Address
City | State | Zip

Director Name
Street Address
City | State | Zip

Director Name
Street Address
City | State | Zip

Director Name
Street Address
City | State | Zip

10. SHARES AUTHORIZED AND ISSUED (*"X" BOX FOR ATTACHMENT*)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	*Class/Series*	*Par Value*	*Number of Shares*	*Class/Series*	*Par Value*
1000 SHS	NO PAR	COM	400	Comm	no Par

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

* 4 0 9 5 3 *

File Date: 7.29.97
Check No.: 10609
By: TCP
FOR SECRETARY OF STATE USE ONLY

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.

Sharon L Gamba — 5.1.97
Signature of Officer — *Date*

SHARON GAMBA
Print or Type Name of Officer

Vice President
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996

State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1–March 1
Filing Fee: $50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO.	2. NAME OF CORPORATION
40953	CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE	CITY	STATE	ZIP CODE
131 Fletcher Avenue	Cranston	RI	02920

4. BUSINESS PHONE NO.	5. STATE OF INCORPORATION	6. SIC CODE
943-3586	RHODE ISLAND	8953

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
Auto Repair

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME	STREET ADDRESS	CITY	STATE	ZIP CODE
Dennis Gamba	106 Morning Dove Dr.	Saunderstn	RI	02874

VICE PRESIDENT NAME	STREET ADDRESS	CITY	STATE	ZIP CODE
Sharon Gamba	106 Morning Dove Dr.	Saunderstn	RI	02874

SECRETARY NAME	STREET ADDRESS	CITY	STATE	ZIP CODE

TREASURER NAME	STREET ADDRESS	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME	STREET ADDRESS	CITY	STATE	ZIP CODE

DIRECTOR NAME	STREET ADDRESS	CITY	STATE	ZIP CODE

DIRECTOR NAME	STREET ADDRESS	CITY	STATE	ZIP CODE

DIRECTOR NAME	STREET ADDRESS	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
1000 SHS NO PAR COM			None		without par

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.

Sharon Gamba
Signature of Officer

SHARON GAMBA
Print or Type Name of Officer

Vice President 3.3.96
Title of Officer Date

File Date: 3/15/96
Check No: 8150
By: VP / VP
For Secretary of State Use Only

DETACH BOTTOM BEFORE RETURNING

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

ANNUAL REPORT
Please Type or Print
File Annually – Jan. 1 - March 1
Filing Fee $50.00
Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0040953 Annual Report for the year: 1995

Name of Corporation: CRANSTON COLLISION CENTER SALES AND SERVICE, INC.

Business entity organized under the laws of the State of: RI

For foreign entity, address and telephone number of principal office:

Phone: ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

131 Fletcher Avenue
Cranston RI 02920
Phone: (401) 943-3586

Business Entity is (check one):
[✓] Business Corporation (See RIGL Chapter 7-1.1)
[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:
Auto repair

THE NAMES OF THE OFFICERS ARE:

		STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT	Dennis Gamba	106 Morning Dove Dr.	Saunderstown RI	02874
VICE PRESIDENT	Sharon Gamba	"	"	"
SECRETARY		STREET ADDRESS	CITY/STATE	ZIP CODE
TREASURER		STREET ADDRESS	CITY/STATE	ZIP CODE

THE NAMES OF THE DIRECTORS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
1000			

Without Par.

Date FEB 20 . 19 95

By: Sharon Gamba
/ SHARON GAMBA
PRINT OR TYPE NAME OF OFFICER SIGNING
Vice President
TITLE OF OFFICER SIGNING

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

DENNIS GAMBA

131 FLETCHER AVE.
CRANSTON RI 02920

FILED
FEB 22 1995
By [illegible]

OK # 5572 NW

Filing Fee $50.00
Payable to
Secretary of State

PLEASE TYPE or PRINT

File Annually
LLC Sept 1 - Nov 1
CORP Jan 1 - March 1

State of Rhode Island and Providence Plantations
Office of The Secretary of State

100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

Corporate ID: 0040953 Annual Report for the year 1994

Name of Business Entity: Cranston Collision Center Sales + Services, Inc.

Business entity organized under the laws of the State of: R.I.

Federal Taxpayer Identification Number: [redacted]

For foreign entity, address and telephone number of principal office:

Phone ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)

131 Fletcher Avenue
Cranston R.I 02920

Phone: (401) 943-7262

Business Entity is (check one)

- [✓] Business Corporation (See RIGL Chapter 7-1.1)
- [ ] Professional Service Corporation (See RIGL Chapter 7-5.1)
- [ ] Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed.

Sharon L. Gamba
131 Fletcher Ave
Cranston, RI 02920

Brief statement of the character of business conducted in Rhode Island

Auto Repair

Date of Organization: 12.1.86

Date of Qualification to do business in Rhode Island (if foreign entity)

THE NAMES OF THE OFFICERS ARE:

	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
[ ] CHIEF EXECUTIVE OFFICER [✓] PRESIDENT	Dennis W. Gamba	106 Mourning Dove Dr	Saunderstown RI	02874
[ ] CHIEF FINANCIAL OFFICER [✓] SECRETARY	Sharon L. Gamba	106 Mourning Dove Dr	Saunderstown RI	02874
[ ] CHIEF FINANCIAL OFFICER [ ] TREASURER				

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable): 1000	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 1000	NUMBER
CLASS	CLASS
SERIES	SERIES
PAR VALUE OR WITHOUT PAR: Without par value	PAR VALUE OR WITHOUT PAR

Date: Dec 9 19 94

By: Sharon L. Gamba
SHARON L. Gamba
PRINT OR TYPE NAME OF OFFICER SIGNING
Vice President
TITLE OF OFFICER SIGNING

Form 21 - 1994

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

FILED
DEC 2 1994
BY: DD

Filing Fee $50.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

2072

Corporate ID 0040953 Annual Report for the year 1993

FIRST: The name of the corporation is CRANSTON COLLISION CENTER SALES AND SERV

SECOND: It is incorporated under the laws of State of Rhode Island

THIRD: Character of business, briefly stated, is AUTOBODY REPAIR

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 131 FLETCHER AVENUE, CRANSTON, RI 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
DENNIS GAMBA	President	106 MORNING DOVE DRIVE, SAUNDERSTOWN, RI
SHARON GAMBA	Vice President	106 MORNING DOVE DRIVE, SAUNDERSTOWN, RI
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

FEB 16 1993

COPY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

Dated February 11, 1993 19

CRANSTON COLLISION CENTER SALES & SERVICE, INC.
(Name of Corporation)

By Sharon Gamba

Title VICE PRESIDENT

(Report must be signed by an officer)

Form 31 - 1/95

Filing Fee $50.00

To be filed annually between
January 1st and March 1st

Ck. 0484
Cs. 41
72557

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0040856 Annual Report for the year 1992

FIRST: The name of the corporation is CRANSTON COLLISION CENTER SALES AND SE

SECOND: It is incorporated under the laws of STATE OF RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTOBODY REPAIR

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 131 FLETCHER AVENUE CRANSTON, R.I.

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
DENNIS GAMBA	President	1 ROTONDO AVENUE CRANSTON, R.I.
SHARON GAMBA	Vice President	1 ROTONDO AVENUE CRANSTON, R.I.
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

PAID
JAN 27 1992
SEC'Y OF STATE

No. of Shares	Class	Par Value or statement that shares are without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

Dated Jan 23 19 92

CRANSTON COLLISION CENTER SALES & SERVICE Inc.
(Name of Corporation)

By Sharon Gamba

Title Vice President

(Report must be signed by an officer)

Form 31 1/85

Filing Fee $50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

$5.

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0040953 Annual Report for the year 1991

FIRST: The name of the corporation is CRANSTON COLLISION CENTER SALES AND SER

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Auto repair & Sales

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 131 Fletcher Avenue
Cranston, R.I. 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Dennis W. Gamba	President	1 Rotondo Ave Cranston RI
Sharm L. Gamba	Vice President	1 Rotondo Ave Cranston RI
Sharm L. Gamba	Secretary	1 Rotondo Ave Cranston R.I
Dennis W. Gamba	Treasurer	1 Rotondo Ave Cranston R.I.

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
50/50			

PAID
JAN 15 1991
SEC'Y OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
50/50			

Dated January 14 19 91

Cranston Collision Center Sales + Service Inc.
(Name of Corporation)

By Sharon L Gamba

Title Vice President

(Report must be signed by an officer)

Form 31 1/85

Filing Fee $15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0040953 Annual Report for the year 1990

FIRST: The name of the corporation is CRANSTON COLLISION CENTER SALES AND SERVIC

SECOND: It is incorporated under the laws of STATE OF RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTOBODY REPAIR

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 131 FLETCHER AVENUE CRANSTON, R.I.

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
DENNIS GAMBA	President	1 ROTONDO AVENUE CRANSTON, R.I.
SHARON GAMBA	Vice President	1 ROTONDO AVENUE CRANSTON, R.I.
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

PAID
FEB 28 1990
SEC'Y. OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

Dated February 21 19 90

CRANSTON COLLISION CENTER SALES & SERVICE INC.
(Name of Corporation)

By

(Report must be signed by an officer)

Title PRESIDENT

Form 3 1/85

Filing Fee $15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0040953 Annual Report for the year 1989

FIRST: The name of the corporation is CRANSTON COLLISION CENTER SALES AND SERV

SECOND: It is incorporated under the laws of STATE OF RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTOBODY REPAIR

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 131 FLETCHER AVE. CRANSTON RI.

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
DENNIS GAMBA	President	1 ROTONDO AVE CRANSTON RI
SHARON GAMBA	Vice President	1 ROTONDO AVE CRANSTON RI.
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

Dated FEBRUARY 24 19 89

CRANSTON Collision Center Sales + Service In
(Name of Corporation)

By Sharon Gamba

Title Vice President

(Report must be signed by an officer)

Form 31 1/85

Filing Fee $15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0040953 Annual Report for the year 1988

FIRST: The name of the corporation is CRANSTON COLLISION CENTER SALES & SERVICE INC.

SECOND: It is incorporated under the laws of STATE OF RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTOBODY REPAIR

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 131 FLETCHER AVENUE CRANSTON, R.I.

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
DENNIS GAMBA	President	1 ROTONDO AVENUE CRANSTON, R.I.
SHARON GAMBA	Vice President	1 ROTONDO AVENUE CRANSTON, R.I.
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

APR 04 1989

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

Dated APRIL 4, 19 89

CRANSTON COLLISION CENTER SALES & SERVICE INC.
(Name of Corporation)

By

Title PRESIDENT

Filing Fee $15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0010953 Annual Report for the year 1987

FIRST: The name of the corporation is CRANSTON COLLISION CENTER SALES & SERVICE INC.

SECOND: It is incorporated under the laws of STATE OF RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTOBODY REPAIR

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 131 FLETCHER AVENUE CRANSTON, R.I.

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
DENNIS GAMBA	President	1 ROTONDO AVENUE CRANSTON, R.I.
SHARON GAMBA	Vice President	1 ROTONDO AVENUE CRANSTON, R.I.
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

APR 04 1989

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value

Dated APRIL 4, 19 89.

CRANSTON COLLISION CENTER SALES & SERVICE INC.
(Name of Corporation)

By

Title