



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

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV

2020 MAR 27 P 2:54

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.

1. Entity ID Number 40679		2. Exact name of the Corporation BARREIROS AUTO SALES, INC.			
3. Principal Office Address 620 SMITHFIELD AVENUE			City LINCOLN	State RI	Zip 02865
4. NAICS Code 44120		6. Brief description of the character of business conducted in Rhode Island USED AUTO SALES DEALER			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name ELIAS BARREIROS			Vice-President Name DAVID BARREIROS		
Street Address 25 MEADOW SITE DRIVE			Street Address 11 LAWRENCE LANE		
City LINCOLN	State RI	Zip 02865	City LINCOLN	State RI	Zip 02865
Secretary Name ELIAS BARREIROS			Treasurer Name DAVID BARREIROS		
Street Address 25 MEADOW SITE DRIVE			Street Address 11 LAWRENCE LANE		
City LINCOLN	State RI	Zip 02865	City LINCOLN	State RI	Zip 02865
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name ELIAS BARREIROS			Director Name DAVID BARREIROS		
Street Address 25 MEADOW SITE DRIVE			Street Address 11 LAWRENCE LANE		
City LINCOLN	State RI	Zip 02865	City LINCOLN	State RI	Zip 02865
Director Name N/A			Director Name N/A		
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 <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing. A			NUMBER OF SHARES		CLASS/SERIES
			200 SHARES		COMMON
					PAR VALUE
					NO PAR
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 DAVID BARREIROS					Date 2/19/20
Signature of Authorized Representative 					

SIGN DOCUMENT HERE

**FILED**

MAR 27 2020

BY Ch CK 2171

2.54

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