



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

**FILED**

MAY 22 2020

BY WISU  
EM

**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 <b>001677376</b>		2. Exact name of the Corporation <b>Don's Garage, Inc.</b>			
3. Principal Office Address <b>667 Warwick Ave.</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>To own and maintain an automobile inspection and repair facility.</b>			
5. State of Incorporation <b>RI</b>		Title <b>7-1.2-1701</b>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Donald Morris</b>			Vice-President Name <b>Michael Morris</b>		
Street Address <b>11 Blueberry Heights</b>			Street Address <b>11 Rockcrest Ave.</b>		
City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
Secretary Name <b>Michael Morris</b>			Treasurer Name <b>Donald Morris</b>		
Street Address <b>11 Rockcrest Ave.</b>			Street Address <b>11 Blueberry Heights</b>		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Donald Morris</b>			Director Name <b>Michael Morris</b>		
Street Address <b>11 Blueberry Heights</b>			Street Address <b>11 Rockcrest Ave.</b>		
City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
Director Name <b>Steven Morris</b>			Director Name		
Street Address <b>134 Asdale Street</b>			Street Address		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>	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.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		<b>100</b>		<b>Common</b>	<b>0.00</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>Michael Morris</b>				Date <b>January 6, 2020</b>	
Signature of Authorized Representative <i>Michael J Morris</i>				SIGN DOCUMENT HERE	