



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. 46177		2. Name of Corporation East Coast Collision & Restoration, Inc.		
3. Street Address Principal Business Office 1310 JEFFERSON BLVD		City WARWICK	State RI	Zip 02886
4. Business Phone No.		5. State of Incorporation RHODE ISLAND		6. SIC Code 8953
7. Brief Description of the Character of Business Conducted in Rhode Island AUTOMOTIVE REPAIRS, GENERAL AND SPECIALIZED				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name JOSEPH DONATO		Vice President Name		
Street Address 252 NEW LONDON AVE		Street Address		
City WESTWARWICK	State RI	Zip 02893	City	State
Secretary Name JOSEPH DONATO		Treasurer Name		
Street Address 252 NEW LONDON AVE		Street Address		
City WEST WARWICK	State RI	Zip 02893	City	State
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name JOSEPH DONATO		Director Name		
Street Address 252 NEW LONDON AVE		Street Address		
City WEST WARWICK	State RI	Zip 02893	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
1,000 NO PAR VALUE			100	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 9/14/05

Check No 14039

By [Signature]

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 of Officer [Signature] Date 9/10/05

JOSEPH DONATO

Print or Type Name of Officer

PRESIDENT

Title of Officer



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. Corporation ID No. 46177		2. Name of Corporation East Coast Collision & Restoration, Inc.			
3. Street Address Principal Business Office 1310 JEFFERSON BLVD			City WPA CK	State RI	Zip 02886
4. Business Phone No. 401-739-7711		5. State of Incorporation RHODE ISLAND			6. SIC Code 8953
7. Brief Description of the Character of Business Conducted in Rhode Island AUTOMOTIVE REPAIRS, GENERAL AND SPECIALIZED					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JOSEPH DONATO			Vice President Name		
Street Address 352 NEW LONDON AVE			Street Address		
City WEST WARWICK	State RI	Zip 02893	City	State	Zip
Secretary Name JOSEPH DONATO			Treasurer Name		
Street Address 352 NEW LONDON AVE			Street Address		
City WEST WARWICK	State RI	Zip 02893	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name JOSEPH DONATO			Director Name		
Street Address 352 NEW LONDON AVE			Street Address		
City WEST WARWICK	State RI	Zip 02893	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE	COMMON	NO PAR	100	COMMON	NO PAR

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



* 4 6 1 7 7 *

File Date	_____
Check No.	_____
By	_____
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.

Joseph Donato 4/20/04
Signature of Officer Date
JOSEPH DONATO
Print or Type Name of Officer
PRESIDENT
Title of Officer



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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 46177 2. Name of Corporation East Coast Collision & Restoration, Inc.
3. Street Address Principal Business Office 1310 JEFFERSON BLVD City WARWICK State RI Zip 02886
4. Business Phone No. 401-739-7711 5. State of Incorporation RHODE ISLAND 6. SIC Code 8953

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

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

President Name <u>JOSEPH DONATO</u>	Vice President Name
Street Address <u>342 NEW LONDON TURNPIKE</u>	Street Address
City <u>WEST WARWICK</u> State <u>RI</u> Zip <u>02893</u>	City State Zip
Secretary Name <u>JOSEPH DONATO</u>	Treasurer Name
Street Address <u>342 NEW LONDON AVE</u>	Street Address
City <u>WEST WARWICK</u> State <u>RI</u> Zip <u>02893</u>	City State Zip

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

Director Name <u>JOSEPH DONATO</u>	Director Name
Street Address <u>342 NEW LONDON AVE</u>	Street Address
City <u>WEST WARWICK</u> State <u>RI</u> Zip <u>02893</u>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<u>1,000 NO PAR VALUE</u>	<u>COMMON</u>	<u>NO PAR</u>

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<u>100</u>	<u>COMMON</u>	<u>NO PAR</u>

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



* 4 6 1 7 7 *

File Date: 1.28.03
Check No. 9498
By: UP

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 of Officer Joseph Donato Date 1/27/03
Print or Type Name of Officer JOSEPH DONATO
Title of Officer President



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



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. **46177** 2. Name of Corporation **EAST COAST COLLISION & RESTORATION, INC.**
3. Street Address Principal Business Office **1310 JEFFERSON BLVD** City **WARWICK** State **RI** Zip **02886**
4. Business Phone No. **401-739-7711** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8953**

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

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

President Name JOSEPH DONATO	Vice President Name
Street Address 252 NEW LONDON AVE	Street Address
City State Zip WEST WARWICK RI 02893	City State Zip
Secretary Name	Treasurer Name
Street Address	Street Address
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 JOSEPH DONATO	Director Name
Street Address 252 NEW LONDON AVE	Street Address
City State Zip WEST WARWICK RI 02893	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1,000 SHS NO PAR VAL.

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100 SHS Common NO PAR VAL

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

FILED
JAN 29 2002
By **GA 2803**
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 of Officer **Joseph Donato** Date **1/22/02**
Print or Type Name of Officer **JOSEPH DONATO**
Title of Officer **PRESIDENT**

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 46177 2. Name of Corporation East Coast Collision & Restoration, Inc.
3. Street Address Principal Business Office 1316 JEFFERSON BLVD WARWICK RI 02886
4. Business Phone No. 401-739-7711 5. State of Incorporation RHODE ISLAND 6. SIC Code 8953

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

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

President Name JOSEPH DONATO Street Address 352 NEW LONDON AVE City State Zip WEST WARWICK RI 02893	Vice President Name Street Address City State Zip Treasurer Name Street Address City State Zip
--	---

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

Director Name JOSEPH DONATO Street Address 252 NEW LONDON AVE City State Zip WEST WARWICK RI 02893	Director Name Street Address City State Zip Director Name Street Address City State Zip
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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value

1,000 SHS NO PAR VAL

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

ISSUED SHARES
Number of Shares Class/Series Par Value

100 SHARES COMMON NO PAR VAL

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



FILED

File Date: JAN 22 2002

Check No. 280155

By: _____

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 of Officer: JOSEPH DONATO Date: 11/19/01

Print or Type Name of Officer: JOSEPH DONATO

Title of Officer: PRESIDENT



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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **46177** 2. Name of Corporation **East Coast Collision & Restoration, Inc.**
3. Street Address Principal Business Office **1310 JEFFERSON BLVD** City **WARWICK** State **RI** Zip **02886**
4. Business Phone No. **401 739 7711** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8953**

7. Brief Description of the Character of Business Conducted in Rhode Island
AUTOMOTIVE REPAIRS, General & Specialized

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

President Name JOSEPH DONATO	Vice President Name
Street Address 1310 JEFFERSON BLVD	Street Address
City WARWICK State RI Zip 028	City State Zip
Secretary Name	Treasurer Name
Street Address	Street Address
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
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)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1,000 SHS NO PAR VAL

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100 Common no par

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



* 4 6 1 7 7 *

File Date **8-9-00**
Check No. **4585**
By **AMF**

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 of Officer **Joseph Donato** Date **7-26-00**
Print or Type Name of Officer **JOSEPH DONATO**
Title of Officer **PRESIDENT**



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 1999
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 46177 2. Name of Corporation EAST COAST COLLISION & RESTORATION INC
3. Street Address Principal Business Office 1310 JEFFERSON BLVD City WARWICK State RI Zip 02886
4. Business Phone No. 401-739-7711 5. State of Incorporation R.I. 6. SIC Code

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

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

President Name <u>JOSEPH DONATO</u>	Vice President Name
Street Address <u>1310 JEFFERSON BLVD</u>	Street Address
City <u>WARWICK</u> State <u>RI</u> Zip <u>02886</u>	City State Zip
Secretary Name <u>JOSEPH DONATO</u>	Treasurer Name
Street Address <u>1310 JEFFERSON BLVD</u>	Street Address
City <u>WARWICK</u> State <u>RI</u> Zip <u>02886</u>	City State Zip

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

Director Name <u>JOSEPH DONATO</u>	Director Name
Street Address <u>1310 JEFFERSON BLVD</u>	Street Address
City <u>WARWICK</u> State <u>RI</u> Zip <u>02886</u>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<u>2,000</u>	<u>NO PAR common</u>	

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<u>200</u>	<u>Common</u>	<u>NO PAR</u>

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

File Date: 8-23-99

Check No.: 2671

By: iup

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 of Officer: Joseph Donato Date: 8-20-99

Print or Type Name of Officer: Joseph Donato

Title of Officer: President



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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

48177

East Coast Collision & Restoration, Inc.

3. Street Address Principal Business Office

1316 JEFFERSON BLVD

City

WARWICK

State

RI

Zip

02886

4. Business Phone No.

5. State of Incorporation

6. SIC Code

401-739-7711

RHODE ISLAND

8953

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

AUTO BODY REPAIR AND RESTORATION

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

President Name

Vice President Name

JOSEPH DONATO

Street Address

Street Address

252 NEW LONDON AVE

City

State

Zip

City

State

Zip

WEST WARWICK

RI

02893

Secretary Name

Treasurer Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

Director Name

Director Name

JOSEPH DONATO

Street Address

Street Address

252 NEW LONDON AVE

City

State

Zip

City

State

Zip

WEST WARWICK

RI

02893

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,000 SHS NO PAR VAL

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100 SHARES

COMMON

NO PAR VAL

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



* 4 6 1 7 7 *

File Date

3.2.98

Check No

4108

By

100

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 of Officer

Joseph Donato

Date

3-

Print or Type Name of Officer

Joseph Donato

Title of Officer

President



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.

46177

2. Name of Corporation

East Coast Collision & Restoration, Inc.

3. Street Address Principal Business Office

1316 JEFFERSON BLVD

City

WARWICK

State

RI

Zip

02886

4. Business Phone No.

401-739-7711

5. State of Incorporation

RHODE ISLAND

6. SIC Code

8953

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

AUTO BODY SHOP

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

President Name

JOSEPH DONATO

Vice President Name

Street Address

252 NEW LONDON AVE

Street Address

City State Zip

WEST WARWICK RI 02893

City

State

Zip

Secretary Name

Treasurer Name

Street Address

Street Address

City State Zip

City

State

Zip

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

Director Name

JOSEPH DONATO

Director Name

Street Address

252 NEW LONDON AVE

Street Address

City State Zip

WEST WARWICK RI 02893

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City State Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,000 SHS NO PAR VAL

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100 SHARES

Common

NO PAR VALUE

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



* 4 6 1 7 7 *

File Date: 5/16/97

Check No.: 3059

By: GAB

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 of Officer: Joseph Donato 1-27-97

Print or Type Name of Officer: JOSEPH DONATO

Title of Officer: PRESIDENT

**PROFIT CORPORATION
ANNUAL REPORT****1996**Filing Period: January 1-March 1
Filing Fee: \$50.00State 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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 2. NAME OF CORPORATION
0046177 EAST COAST COLLISION + RESTORATION INC

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE CITY STATE ZIP CODE
1310 JEFFERSON BLVD WARWICK RI 02886

4. BUS. VESS. PHONE NO. 5. STATE OF INCORPORATION 9. SIC CODE
401 789-7711 RI 8953

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUS. VESS. CONDUCTED IN RHODE ISLAND
*** AUTO BODY REPAIR + RESTORATION.**

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME			VICE PRESIDENT NAME		
JOSEPH DONATO					
STREET ADDRESS			STREET ADDRESS		
1310 JEFFERSON BLVD					
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
WARWICK	RI	02886			
SECRETARY NAME			TREASURER NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME			DIRECTOR NAME		
JOSEPH DONATO					
STREET ADDRESS			STREET ADDRESS		
262 NEW LONDON AVE					
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
WEST WARWICK	RI	02893			
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

NUMBER OF SHARES	AUTHORIZED SHARES CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	ISSUED SHARES CLASS / SERIES	PAR VALUE
2,000	COMMON	NO PAR	206	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:

8/19/96

Check No:

2389

By:

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 of Officer

JOSEPH DONATO

Print or Type Name of Officer

PRESIDENT

Title of Officer

8-19-96

Date
FORM 31 12-95

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: 0046177 Annual Report for the year: 1995

Name of Corporation: EAST COAST COLLISION + RESTORATION, INC.

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

Business Entity is (check one):

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

☐ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: () _____

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

Address and telephone of the principal office of business entity in Rhode

Island (Provide street address - Not P.O. Box):

1310 JEFFERSON BLVD
WARWICK, RI 02886

Phone: (401) 739-7711

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Joseph Donato</u>	<u>1310 JEFFERSON BLVD</u>	<u>WARWICK R.I.</u>	<u>02886</u>
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE

SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Joseph Donato</u>	<u>1310 JEFFERSON BLVD</u>	<u>WARWICK RI</u>	<u>02886</u>
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Joseph Donato</u>	<u>1310 JEFFERSON BLVD</u>	<u>WARWICK, R.I.</u>	<u>02886</u>
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
<u>200</u>	<u>NO par common</u>

Number of Shares	Class / Series
<u>200</u>	<u>NO par common</u>

Date 7-21, 19 95

By: Joseph Donato Pres

PRINT OR TYPE NAME OF OFFICER SIGNING

Joseph Donato Pres.

TITLE OF OFFICER SIGNING

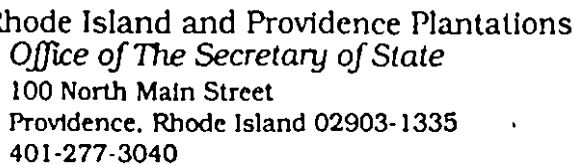
Pres.

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS: Joseph Donato

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

FILED
JUL 26 1995
J. M. L. 1265

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JUL 21 10 53 AM '33



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

Corporate ID: 0046177 Annual Report for the year: 1994

Name of Corporation: EAST COAST COLLISION + RESTORATION INC

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: (408) 239-2211

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

Address and telephone of the principal office of business entity in Rhode

Island (Provide street address - Not P.O. Box):

1310 JEFFERSON BLVD
WARWICK, R.I. 02856

Phone: (401) 739 2711

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Joseph Donato	1310 Jefferson Blvd	Warwick R.I.	02886
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE

SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Joseph H. Donato	1340 Jefferson Blvd Wrentham	L.I.	0286
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Joseph Donato	1310 Jefferson Blvd	Warwick R.I.	02886

[illegible]

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
2000	NO PAR Common

Number of Shares	Class / Series
200	NO PRE Common

Date 7-26 1995

By: Joseph Donato Pres

PRINT OR TYPE NAME OF OFFICER SIGNING Joseph Danahy Prec.

TITLE OF OFFICER SIGNING *Pres.*

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS: Joseph Donofres.

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

and/or registered agent indicated below i

RECEIVED
JUL 24 10 55 AM '35

Filing Fee \$50.00

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

29349B
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0045177 Annual Report for the year 1993

FIRST: The name of the corporation is East Coast Collision & Restoration, Inc.

SECOND: It is incorporated under the laws of R. I.

THIRD: Character of business, briefly stated, is AUTO BODY REPAIR AND
RESTORATION

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 1310 JEFFERSON BLVD
WARWICK RI 02886

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

Name	Office	Address (including number, street, zip code)
<u>JOSEPH DONATO</u>	<u>Director</u>	
	<u>Director</u>	
	<u>Director</u>	
<u>JOSEPH DONATO</u>	<u>President</u>	
	<u>Vice President</u>	
	<u>Secretary</u>	
	<u>Treasurer</u>	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>2000</u>	<u>COMMON</u>		<u>NO PAR VALUE</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>206</u>	<u>COMMON</u>		<u>NO PAR VALUE</u>

Dated JULY 31 1993

EAST COAST COLLISION & RESTORATION, INC
(Name of Corporation)

By Joe Donato

Title PRESIDENT

(Report must be signed by an officer)

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

Corporate ID 0045177 Annual Report for the year 1992

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SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is AUTO BODY REPAIR

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 1162 ATWOOD AVE
JOHNSTON RI 02919

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

Name	Office	Address (including number, street, zip code)
<u>JOSEPH DONATO</u>	<u>Director</u>	<u>1162 ATWOOD AVE JOHNSTON RI</u>
	<u>Director</u>	
	<u>Director</u>	
<u>JOSEPH DONATO</u>	<u>President</u>	<u>1162 ATWOOD AVE JOHNSTON RI</u>
	<u>Vice President</u>	
<u>JOSEPH DONATO</u>	<u>Secretary</u>	<u>1162 ATWOOD AVE JOHNSTON RI</u>
	<u>Treasurer</u>	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>2000</u>	<u>Common</u>	<u>DEC - 2 1992</u>	<u>NO PAR VALUE</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>206</u>		<u>SECY OF STATE</u> <u>CZ# 91617</u>	<u>NO PAR VALUE</u>

Dated 11-6 1992 EAST COAST COLLISION & RESTORATION INC.
(Name of Corporation)

By _____

(Report must be signed by an officer)

Title PRESIDENT

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903Corporate ID 0046177Annual Report for the year 1989FIRST: The name of the corporation is EAST COAST COLLISION + RESTORATION INCSECOND: It is incorporated under the laws of RHODE ISLANDTHIRD: Character of business, briefly stated, is AUTO BODY REPAIR AND
RELATED ACTIVITIES

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 1162 ATWOOD AVEJOHNSTON RI 02919-4920

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

JOSEPH DONATO

President

252 NEW LONDON AVE W. WARWICK RI 02893

Vice President

Secretary

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value1000COMMONNO PAR VALUE

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value100COMMONNO PAR VALUEDated MARCH 29 1991EAST COAST COLLISION + RESTORATION INC

(Name of Corporation)

By

Joseph Donato

Title

PRESIDENT

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
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Address (including number, street, zip code)

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Director

Director

JOSEPH DONATO

President

252 NEW LONDON AVE W. WARWICK RI 02893

Vice President

Secretary

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value1000CommonNO PAR VALUE

FILED & RECORDED

APR 09 1991

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No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value100CommonNO PAR VALUEDated MARCH 29 1991EAST COAST COLLISION + RESTORATION INC
(Name of Corporation)

By

Joseph DonatoTitle PRESIDENT

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

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	Director	
	Director	
JOSEPH DONATO	President	252 NEW LONDON AVE W. WARWICK RI 02893
	Vice President	
	Secretary	
	Treasurer	

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No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		NO PAR VALUE

Dated MARCH 29 1991

EAST COAST COLLISION + RESTORATION, INC
(Name of Corporation)

By Joseph Donato
Title PRESIDENT

(Report must be signed by an officer)