



**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. 41986		2. Name of Corporation THE ENTHUSIAST, INC.			
3. Street Address Principal Business Office 950 Smith Street			City Providence	State RI	Zip 02908
4. Business Phone No. (401) 421-1170		5. State of Incorporation RHODE ISLAND			6. SIC Code 5884
7. Brief Description of the Character of Business Conducted in Rhode Island AUTOMOTIVE SPECIALTY SHOP					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Russell Rico			Vice President Name Cynthia Rico		
Street Address 1417 Atwood Avenue			Street Address 1417 Atwood Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name Cynthia Rico			Treasurer Name Russell Rico		
Street Address 1417 Atwood Avenue			Street Address 1417 Atwood Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			100 SHS	Common	No Par
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

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



**FILED**

File Date \_\_\_\_\_

MAR 07 2005

Check No. \_\_\_\_\_

By Kmc

By \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

CS9271

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.

Russell Rico 3/20/2005  
Signature of Officer Date

Russell Rico  
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)

Form with sections 1-11: Corporate ID No. 41986, Name of Corporation THE ENTHUSIAST, INC., Street Address 950 Smith Street, City Providence, State RI, Zip 02908. Includes officer and director information for Russell Rico and Cynthia Rico.

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



\* 4 1 9 8 6 \*

FOR SECRETARY OF STATE USE ONLY
File Date 2/13/04
Check No. 6720
By: KMC

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: Russell Rico
Date: 2/9/2004
Print or Type Name of Officer: President
Title of Officer



**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. **41986** 2. Name of Corporation **THE ENTHUSIAST, INC.**  
3. Street Address Principal Business Office **950 Smith Street** City **Providence** State **RI** Zip **02908**  
4. Business Phone No. **(401) 421-1170** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5884**  
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 <b>Russell Rico</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>	Vice President Name <b>Cynthia Rico</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>
Secretary Name <b>Cynthia Rico</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>	Treasurer Name <b>Russell Rico</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>

**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	Class/Series	Par Value
1,000 NO PAR VALUE	Common	

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

ISSUED SHARES	Class/Series	Par Value
100 SHS	Common	No Par

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



\* 4 1 9 8 6 \*

File Date: 1/31/03  
Check No.: 1465  
By: [Signature]

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] 1/29/03  
Signature of Officer Date  
**Russell Rico**  
Print or Type Name of Officer  
**President**  
Title of Officer



**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. **41986** 2. Name of Corporation **THE ENTHUSIAST, INC.**  
3. Street Address Principal Business Office **950 Smith Street** City **Providence** State **RI** Zip **02908**  
4. Business Phone No. **(401) 421-1170** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5884**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**To conduct an automotive specialty shop.**

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

President Name <b>Russell Rico</b>	Vice President Name <b>Cynthia Rico</b>
Street Address <b>1417 Atwood Avenue</b>	Street Address <b>1417 Atwood Avenue</b>
City State Zip <b>Johnston RI 02919</b>	City State Zip <b>Johnston RI 02919</b>
Secretary Name <b>Cynthia Rico</b>	Treasurer Name <b>Russell Rico</b>
Street Address <b>1417 Atwood Avenue</b>	Street Address <b>1417 Atwood Avenue</b>
City State Zip <b>Johnston RI 02919</b>	City State Zip <b>Johnston RI 02919</b>

**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 NO PAR VALUE Common**

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

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**100 SHS 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: 2-1-02  
Check No.: 4930  
By: AMK

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: Russell J. Rico Date: 1/22/02  
**Russell Rico**  
Print or Type Name of Officer  
**President**  
Title of Officer



**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. **41986** 2. Name of Corporation **THE ENTHUSIAST, INC.**

3. Street Address Principal Business Office **950 Smith Street** City **Providence** State **RI** Zip **02908**

4. Business Phone No. **(401) 421-1170** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5884**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**To conduct an automotive specialty shop.**

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

President Name <b>Russell Rico</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>	Vice President Name <b>Cynthia Rico</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>
---	--

Secretary Name <b>Cynthia Rico</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>	Treasurer Name <b>Russell Rico</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>
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**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
<b>1000 SHS NO PAR</b>	<b>Common</b>	

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<b>100 SHS</b>	<b>Common</b>	<b>No Par</b>

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



\* 4 1 9 8 6 \*

File Date: **FILED**

Check No.: **JAN 31 2001**

By: **ec 4098**

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.

*Russell Rico* 1/25/2001  
Signature of Officer Date

**Russell Rico**  
Print or Type Name of Officer

**President**  
Title of Officer



**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. **41986** 2. Name of Corporation **THE ENTHUSIAST, INC.**  
3. Street Address Principal Business Office **950 Smith Street** City **Providence** State **RI** Zip **02908**  
4. Business Phone No. **(401) 421-1170** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5884**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**To conduct an automotive specialty shop.**

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

President Name <b>RUSSELL RICO</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>	Vice President Name <b>CYNTHIA RICO</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>
Secretary Name <b>CYNTHIA RICO</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>	Treasurer Name <b>RUSSELL RICO</b> Street Address <b>1417 Atwood Avenue</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>

**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
	<b>1000 SHS NO PAR</b>	<b>Common</b>	

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<b>100 SHS</b>	<b>Common</b>	<b>No Par</b>

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



\* 4 1 9 8 6 \*

File Date: FILED

Check No.: JAN 14 2000

By: [Signature] 3337

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] 11/10/2000  
Signature of Officer Date

**RUSSELL RICO**  
Print or Type Name of Officer

**PRESIDENT**  
Title of Officer



# 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. <b>41986</b>		2. Name of Corporation <b>THE ENTHUSIAST, INC.</b>	
3. Street Address Principal Business Office <b>950 Smith Street</b>		City <b>Providence</b>	State <b>RI</b>
4. Business Phone No. <b>(401) 421-1170</b>		5. State of Incorporation <b>RHODE ISLAND</b>	
6. SIC Code <b>5884</b>			
7. Brief Description of the Character of Business Conducted in Rhode Island <b>To conduct an automotive specialty shop.</b>			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>Russell Rico</b>		Vice President Name <b>Cynthia Rico</b>	
Street Address <b>1417 Atwood Ave.</b>		Street Address <b>Same</b>	
City <b>Johnston</b>	State <b>RI</b>	City <b>Johnston</b>	State <b>RI</b>
Zip <b>02919</b>		Zip <b>02919</b>	
Secretary Name <b>Cynthia Rico</b>		Treasurer Name <b>Russell Rico</b>	
Street Address <b>Same</b>		Street Address <b>Same</b>	
City <b>Johnston</b>	State <b>RI</b>	City <b>Johnston</b>	State <b>RI</b>
Zip <b>02919</b>		Zip <b>02919</b>	
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	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
<b>1000 SHS NO PAR</b>			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
<b>100</b>	<b>Common</b>	<b>No Par</b>	

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



\* 4 1 9 8 6 \*

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.

File Date: **FILED**

Check No.: **JAN 15 1999**

By: **By [Signature]**

FOR SECRETARY OF STATE USE ONLY

**Russell Rico** 1/8/99  
Signature of Officer Date

**Russell Rico**

Print or Type Name of Officer

**President**

Title of Officer



**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. **41986** 2. Name of Corporation **THE ENTHUSIAST, INC.**

3. Street Address Principal Business Office **950 Smith Street** City **Providence** State **RI** Zip **02908**  
4. Business Phone No. **(401) 421-1170** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5884**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**To Conduct an automotive specialty shop.**

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

President Name <b>Russell Rico</b> Street Address <b>1417 Atwood Ave.</b> City <b>Johnston</b> State <b>RI</b> Zip <b>02919</b>	Vice President Name <b>Cynthia Rico</b> Street Address <b>Same</b> City <b>Same</b> State <b>RI</b> Zip <b>02919</b>
Secretary Name <b>Cynthia Rico</b> Street Address <b>Same</b> City <b>Same</b> State <b>RI</b> Zip <b>02919</b>	Treasurer Name <b>Russell Rico</b> Street Address <b>Same</b> City <b>Same</b> State <b>RI</b> Zip <b>02919</b>

**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 (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**1000 SHS NO PAR**

**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



File Date: 1-28-98  
1900  
Check No.: 100  
By: [Signature]

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.

Russell J. Rico 1/18/98  
Signature of Officer Date

Russell Rico  
Print or Type Name of Officer

President  
Title of Officer



**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. **41986** 2. Name of Corporation **THE ENTHUSIAST, INC.**

3. Street Address Principal Business Office **950 Smith Street** City **Providence** State **RI** Zip **02908**  
4. Business Phone No. **(401) 421-1170** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5884**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**To conduct a general automotive specialty company.**

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

President Name <b>RUSSELL RICO</b> Street Address <b>1417 Atwood Ave.</b> City <b>Johnston,</b> State <b>RI</b> Zip <b>02919</b>	Vice President Name <b>CYNTHIA RICO</b> Street Address <b>Same</b> City <b>Same</b> State <b>RI</b> Zip <b>02919</b>
Secretary Name <b>CYNTHIA RICO</b> Street Address <b>Same</b> City <b>Same</b> State <b>RI</b> Zip <b>02919</b>	Treasurer Name <b>RUSSELL RICO</b> Street Address <b>Same</b> City <b>Same</b> State <b>RI</b> Zip <b>02919</b>

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

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 AND ISSUED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1000 SHS NO PAR</b>			<b>100</b>	<b>Common</b>	<b>No Par</b>

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



\* 4 1 9 8 6 \*

**FILED**

**FEB 21 1997**

By **CO#43**  
**180777**

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.

**Russell J. Rico** **2/18/97**  
Signature of Officer Date

**Russell Rico**

Print or Type Name of Officer

**President**

Title of Officer

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

# 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. 41986		2. NAME OF CORPORATION THE ENTHUSIAST, INC.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE C/O Robert J. Cosentino, Esquire 950 Smith Street			CITY Providence	STATE RI	ZIP CODE 02908
4. BUSINESS PHONE NO. (401) 421-1170		5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 5884

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND  
To conduct a general automotive specialty business.

### 8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME Russell Rico			VICE PRESIDENT NAME Cynthia Rico		
STREET ADDRESS 1417 Atwood Avenue			STREET ADDRESS 1417 Atwood Avenue		
CITY Johnston	STATE RI	ZIP CODE 02919	CITY Johnston	STATE RI	ZIP CODE 02919
SECRETARY NAME Cynthia Rico			TREASURER NAME Russell Rico		
STREET ADDRESS 1417 Atwood Avenue			STREET ADDRESS 1417 Atwood Avenue		
CITY Johnston	STATE RI	ZIP CODE 02919	CITY Johnston	STATE RI	ZIP CODE 02919

### 9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	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		100	Common	No 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.

File Date: Jan. 23, 1990

Check No: 5990

By: *[Signature]*  
For Secretary of State Use Only

*[Signature: Russell J. Rico]*  
Signature of Officer

Russell Rico  
Print or Type Name of Officer

President  
Title of Officer

1/28/96  
Date

**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: 0041886 05-0427796 Annual Report for the year: 1995

Name of Corporation: THE ENTHUSIAST, INC.

Business entity organized under the laws of the State of: Rhode Island

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

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:

To conduct a general automotive specialty business.

Phone: ( )

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

c/o Robert J. Cosentino, Esquire  
950 Smith Street

Providence, RI 02908

Phone: (401) 421-1170

**THE NAMES OF THE OFFICERS ARE:**

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>Salvatore C. DiSanto, Jr.</u>	<u>85 Suddard Lane</u>	<u>Scituate, RI</u>	<u>02857</u>
VICE PRESIDENT <u>Linda M. DiSanto</u>	<u>Same As Above</u>		
SECRETARY <u>Linda M. DiSanto</u>	<u>Same As Above</u>		
TREASURER <u>Salvatore C. DiSanto, Jr.</u>	<u>Same As Above</u>		

**THE NAMES OF THE DIRECTORS ARE:**

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	
<u>1,000</u>	<u>Common</u>	<u>No Par</u>	<u>100</u>	<u>Common</u>	<u>No Par</u>

Date December 19, 19 94 By: *Salvatore C. DiSanto, Jr.*

PRINT OR TYPE NAME OF OFFICER SIGNING Salvatore C. DiSanto, Jr.  
 TITLE OF OFFICER SIGNING President

**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.

ROBERT J. COSENTINO ESQ.  
 950 SMITH ST.,  
 PROVIDENCE RI 02908

**FILED**  
**JAN 18 1995**  
*AC 357/1*

Filing Fee \$50.00  
Payable to:  
Secretary of State

PLEASE TYPE or PRINT  
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

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

Corporate ID: 0041986 Annual Report for the year: 1994  
Name of Business Entity: THE ENTHUSIAST, INC.

Business entity organized under the laws of the State of RHODE ISLAND  
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)  
c/o ROBERT J. COSENTINO, ESQ.  
950 Smith Street  
Providence, R.I. 02908  
Phone (401) 421-1170

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 7-1.6)  
Name, title and mailing address of contact person to whom communications may be directed:  
SALVATORE C. DI SANTO, JR., PRESIDENT  
85 Suddard Lane  
Scituate, R.I. 02857  
Brief statement of the character of business conducted in Rhode Island:  
A general automotive specialty  
business.  
Date of Organization 03/02/87  
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
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (INC. ONLY) <u>SALVATORE C. DI SANTO, JR.</u>	<u>85 Suddard Lane</u>	<u>Scituate, R.I.</u>	<u>02857</u>
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (INC. ONLY) <u>LINDA M. DI SANTO</u>	<u>SAME AS ABOVE</u>		
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (INC. ONLY) <u>LINDA M. DI SANTO</u>	<u>SAME AS ABOVE</u>		
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (INC. ONLY) <u>SALVATORE C. DI SANTO, JR.</u>	<u>SAME AS ABOVE</u>		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER <u>1,000</u>	NUMBER <u>100</u>
CLASS <u>COMMON</u>	CLASS <u>COMMON</u>
SERIES	SERIES
<del>PAR</del> WITHOUT PAR <u>NO PAR</u>	<del>PAR</del> WITHOUT PAR <u>NO PAR</u>

Date FEBRUARY 17th 1994  
By: [Signature]  
SALVATORE C. DI SANTO, JR.  
PRINT OR TYPE NAME OF OFFICER SIGNING  
PRESIDENT  
TITLE OF OFFICER SIGNING

Form 301 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

ROBERT J. COSENTINO ESQ.  
950 SMITH ST.,  
PROVIDENCE RI 02908

FILED  
MAR 2 1994  
BY AMEH 29  
3178

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 0041286 Annual Report for the year 1993

FIRST: The name of the corporation is THE ENTHUSIAST, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is a general automotive specialty business

FOURTH: If foreign corporation, address of its principal office. N/A

FIFTH: Business address in Rhode Island c/o Robert J. Cosentino, Esquire  
950 Smith Street, Providence, RI 02908

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Salvatore, C. DiSanto, Jr.	President	85 Suddard Lane, Scituate, RI 02957
Linda M. DiSanto	Vice President	Same As Above
Linda M. DiSanto	Secretary	Same As Above
Salvatore C. DiSanto, Jr.	Treasurer	Same As Above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	Common		No Par

EIGHTH: Number of Shares issued:

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

Rec'd & Filed MAR 2 1993

Rec'd & Filed MAR 2 1993

*Check 2757*  
*2757*  
*2757*

Dated February 12, 19 93

THE ENTHUSIAST, INC.

(Name of Corporation)

By Salvatore C. DiSanto, Jr. President

Title Salvatore C. DiSanto, Jr., 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 0041985 Annual Report for the year 1992

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Salvatore C. DiSanto, Jr.	President	85 Suddard Lane, Scituate, RI 02957
Linda M. DiSanto	Vice President	Same As Above
Linda M. DiSanto	Secretary	Same As Above
Salvatore C. DiSanto, Jr.	Treasurer	Same As Above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	Common		No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	AMT 6038	No Par

Rec'd & Filed MAR 09 1992

Dated January 28, 19 92

THE ENTHUSIAST, INC.  
(Name of Corporation)

By Salvatore C. DiSanto, Jr. President

(Report must be signed by an officer)

Title Salvatore C. DiSanto, Jr., President

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 0041986 Annual Report for the year 1991

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

Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
Salvatore C. DiSanto Jr.	President	85 Suddard Lane, Scituate, RI 02957
Linda M. DiSanto	Vice President	same as above
Linda M. DiSanto	Secretary	same as above
Salvatore C. DiSanto	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	Common		No Par

EIGHTH: Number of Shares issued:

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

Rec'd & Filed **MAR 12 1991**

Dated January 22, 1991

THE ENTHUSIAST, INC.  
(Name of Corporation)

By Salvatore C. DiSanto, Jr. President

(Report must be signed by an officer)

Title Salvatore C. DiSanto, Jr. 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 0041985 Annual Report for the year 1990

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FIFTH: Business address in Rhode Island c/o Robert J. Cosentino, Esquire, 950 Smith Street, Providence, Rhode Island 02908

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Salvatore C. DiSanto, Jr.	President	54 Waller Street, Providence, RI 02908
Linda M. DiSanto	Vice President	54 Waller Street, Providence, RI 02908
Linda M. DiSanto	Secretary	54 Waller Street, Providence, RI 02908
Salvatore C. DiSanto, Jr.	Treasurer	54 Waller Street, Providence, RI 02908

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	Common		No Par

EIGHTH: Number of Shares issued:

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

**Rec'd & Filed MAR 21 1990**

Dated February 6, 19 90

The Enthusiast, Inc.  
(Name of Corporation)

By Salvatore C. DiSanto, Jr.

Title President, Salvatore C. DiSanto, Jr.

(Report must be signed by an officer)

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 0041986 Annual Report for the year 1989

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

Name	Office	Address (including number, street, zip code)	
.....	Director	.....	.....
.....	Director	.....	.....
.....	Director	.....	.....
Salvatore C. DiSanto, Jr.	President	54 Waller Street,	Providence, RI
Linda M. DiSanto	Vice President	"	"
Linda M. DiSanto	Secretary	"	"
Salvatore C. DiSanto, Jr.	Treasurer	"	"

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	Common		

Rec'd & Filed **FEB 24 1989**

EIGHTH: Number of Shares issued:

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

Dated February 6, 19 89

THE ENTHUSIAST, INC.  
(Name of Corporation)

By Salvatore C. DiSanto, Jr.

Title Salvatore C. DiSanto, Jr., President

(Report must be signed by an officer)

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 41986 Annual Report for the year 1988

FIRST: The name of the corporation is THE ENTHUSIAST, INC.

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Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
SALVATORE C. DiSANTO, JR.	President	54 Waller Street, Providence, R.I.
LINDA M. DiSANTO	Vice President	SAME
LINDA M. DiSANTO	Secretary	SAME
SALVATORE C. DiSANTO	Treasurer	SAME

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common		No Par

PAID

EIGHTH: Number of Shares issued:

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

MAR 14 1988

SECY OF STATE  
RJM

FEB 29 1988

Dated February 4, 1988

THE ENTHUSIAST, INC.  
(Name of Corporation)

By *Salvatore C. Disanto*  
SALVATORE C. DISANTO

Title President

(Report must be signed by an officer)