State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2016
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	2. Exact name of the Corporation			
000912403	Ready Imaging, Inc.			
3. Principal Office Address		City	State	Zip
PO Box 1318		Manchester	CT	06045-1318
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
423990	Wholesale Distribution. Maintenance and Imaging of gas stations			
5. State of Incorporation				
CT				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name			Vice-President Name		
Albert E. Whiting			None		
Street Address			Street Address		
336 Knob Hill Rd					
City	State	Zip	City	State	Zip
Meriden	CT	06451			
Secretary Name			Treasurer Name		
None			None		
Street Address			Street Address		
City	State	Zip	City	State	Zip

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name			Director Name		
Albert E. Whiting			None		
Street Address			Street Address		
336 Knob Hill Rd					
City	State	Zip	City	State	Zip
Meriden	CT	06451			
Director Name			Director Name		
None			None		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. Shares Authorized	10. Shares Issued — Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	10,000	CNP	0

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.

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.

Name of Authorized Representative	Date
Albert E. Whiting	12/31/20

Signature of Authorized Representative: AWhiting

FILED
JAN 11 2021
KL JEZDZ
12:57

R.I. DEPT. OF STATE 2021 JAN 11 PM 12:55 BUS. SVCS. DIV.

MAIL TO:
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Phone: (401) 222-3040
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FORM 630 - Revised: 08/2020