RI SOS Filing Number: 202191584950 Date: 2/16/2021 2:25:00 PM

State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2019
Corporation

→ Filing period: January 1 - March 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by April 1.

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BUS SVCS DIV
2021 FEB 16 P 2:24

1. Entity ID Number	2. Exact name of the Corporation			
000058904	Warwick Auto Body, Inc.			
3. Principal Office Address		City	State	Zip
1828 Elmwood Ave		Warwick	RI	02888
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
811121	Auto Body & Auto Paint repairs.			
5. State of Incorporation				
RI				

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

President Name			Vice-President Name		
Michael Gill			Michael Gill		
Street Address			Street Address		
20 Circlewood Dr.			20 Circlewood Dr.		
City	State	Zip	City	State	Zip
Coventry	RI	02816	Coventry	RI	02816
Secretary Name			Treasurer Name		
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		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
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.	600		0.00

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
Michael Gill	2/16/2021
Signature of Authorized Representative	
Michael Gill	**FILED**

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

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FORM 630 - Revised: 08/2020