



**Department of State - Business Services Division**

**Annual Report for the year:** 2021  
**Corporation**

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV

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

2021 FEB 25 P 4:01

1. Entity ID Number 52380		2. Exact name of the Corporation CUMBERLAND HILL AUTO SALES & SERVICE, INC.			
3. Principal Office Address 4084 Mendon Road		City Cumberland		State RI	Zip 02864
4. NAICS Code <del>52380</del> 441120		6. Brief description of the character of business conducted in Rhode Island Used vehicle sales and service			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Karim Mnayarji			Vice-President Name Eva Mnayarji		
Street Address 10 Riata Drive			Street Address 10 Riata Drive		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
Secretary Name Eva Mnayarji			Treasurer Name Karim Mnayarji		
Street Address 10 Riata Drive			Street Address 10 Riata Drive		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Karim Mnayarji			Director Name Eva Mnayarji		
Street Address 10 Riata Drive			Street Address 10 Riata Drive		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized					
This information is currently of record in the Department of State.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Changes require an additional filing.		NUMBER OF SHARES		CLASS/SFRIES	PAR VALUE
		*100*		Common	No Par Value
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 Karim Mnayarji, President					Date 1-12-21
Signature of Authorized Representative 					<b>FILED</b>

FEB 25 2021  
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