



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

MAR 1 2021

BY-5694

1. Entity ID Number 001714887		2. Exact name of the Corporation DIB'S AUTO SALES, INC.			
3. Principal Office Address 450 Bullocks Point Avenue			City Riverside	State RI	Zip 02915
4. NAICS Code 441120		6. Brief description of the character of business conducted in Rhode Island Foreign and domestic auto sales of pre-owned vehicles			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Najib Dib			Vice-President Name Elias F. Dib		
Street Address 9 Carolina Avenue			Street Address 1096 Bullocks Point Avenue		
City Riverside	State RI	Zip 02915	City Riverside	State RI	Zip 02915
Secretary Name Salam Dib			Treasurer Name Natalia Dib		
Street Address 9 Carolina Avenue			Street Address 12 Josal Drive		
City Riverside	State RI	Zip 02915	City Barrington	State RI	Zip 02806
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. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIALS		PAR VALUE
			500	Common	No Par
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 Najib Dib				Date 2-25-21	
Signature of Authorized Representative 					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov