Annual Report for the	year: ₂₀₂₁				FILE	$\mathbf{D}_{\mathbb{R}^{n}}$, \mathbb{R}^{n}
Corporation			_		MAR 17	2021
→ Filing period: January 1→ Filing Fee: \$50.00	- March 1				\bigcap ($\int \Omega$
→ Penalty: Additional \$25.0	0 fee if form is n	ot filed by April 1.		B		1//
1. Entity ID Number	2. Exact nam	ne of the Corporation	on		•	
0000117113	J & D AUTO	SALVAGE, INC.				
3. Principal Office Address			City		State	Zip
4 Bridal Avenue			West Warwick		RI	02893
4 NAICS Code 5. State of Incorporation RI	.1 1	ription of the chara ad auto salvage	cter of business condu	ucted in Rhode Is	land	
7. List ALL officers (names and	addresses)			Check t	he box to indic	cate an attachment
President Name Deborah Cavana	Vice-President Name Michael Cavanaugh					
Street Address 4 Bridal Avenue	Stree: Address 4 Bridal Avenue					
^{City} West Warwick	State RI	Zip 02893	City West Warwic		State RI	^{Zip} 02893
Secretary Name	KI	02093	Treasurer Name	. K	I KI	02833
Occidity Hamo			Treasurer Name			
Street Address	· · · · · · · ·		Street Address			
City	State	Zip	City		State	Zip
8. List ALL directors (names and	l d addresses)	l		Check t	he box to indi	cate an attachment 🔲
Director Name Deborah Cavanau	•		Director Name			1 - 1 - 1
Street Address 4 Bridal Avenue		<u> </u>	Street Address	··		
City West Warwick	State RI	Zip 02893	City		State	Zip
Director Name	, Ki	02033	Director Name		1	
Biredioi Manie						
Street Address	Street Address					
City	State	Zip	City		State	Zip
). Shares Authorized		10. Shares Is	0. Shares Issued C		Check the box to indicate an attachment	
This information is currently of record in the Department of State.		NUMBÉR (NUMBER OF SHARES CL			PAR VALUE
		none				
Changes require an additional fili	ng.					·
11. This report must be execute					ation is in the	hands of a receiver or
trustee, this report must be executed Under penalty of perjury, I dec					panying sche	edules and
statements, and that all states Name of Authorized Representa		l herein are true a	nd correct.		Date	
DEBORAH CAVANAUGH				13/2021		
	entative				1/	10001
Signature of Authorized Represe	evane (

RI SOS Filing Number: 202194664910 Date: 3/17/2021 4:00:00 PM

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

FORM 630 - Revised: 08/2020 Pt 2029