



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED STAMP

MAR 10 2023

10967

1. Entity ID Number 95360		2. Exact name of the Corporation Northeast Race Car and Parts, Inc.			
3. Principal Office Address 244 Davis Drive			City Pascoag	State RI	Zip 02859
4. NAICS Code 431310		6. Brief description of the character of business conducted in Rhode Island The Sale, Retail and Wholesale, of Race Car Parts and Consulting Services Relative to Race Car and Racing			
5. State of Incorporation RI					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Bradley LaFontaine			Vice-President Name Bradley LaFontaine		
Street Address 244 Davis Drive			Street Address 244 Davis Drive		
City Pascoag	State RI	Zip 02859	City Pascoag	State RI	Zip 02859
Secretary Name Bradley LaFontaine			Treasurer Name Bradley LaFontaine		
Street Address 244 Davis Drive			Street Address 244 Davis Drive		
City Pascoag	State RI	Zip 02859	City Pascoag	State RI	Zip 02859
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name Bradley LaFontaine			Director Name		
Street Address 244 Davis Drive			Street Address		
City Pascoag	State RI	Zip 02859	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State.		Check the box to indicate an attachment <input type="checkbox"/>			
Changes require an additional filing.		NUMBER OF SHARES 500	CLASS/SERIES Common	PAR VALUE 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 Bradley LaFontaine					Date
Signature of Authorized Representative 					