



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$50.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Foreign Business Corporation  
Annual Report**

*Filing Period: February 1 - May 1*

*In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR - ENTER THE CURRENT FILING YEAR 2023: 2023**

**1. Corporate ID No.** 000109981

**2. Name of Corporation** C.A.R.S. Protection Plus, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 4350 NORTHERN PIKE  
SUITE 143

City or Town: MONROEVILLE State: PA Zip: 15146 Country: USA

**4. Business Phone No.**

888-335-6838

**5. State of Incorporation**

State: PA

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

524298

**6. Brief Description of the Character of Business Conducted in Rhode Island**

SELLING SERVICE CONTRACTS WITH PURCHASE OF USED VEHICLES

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
TREASURER, DIRECTOR	ROBERT JOHN HOWARTH	30 TWO BRIDGES ROAD, SUITE 240 FAIRFIELD, NJ 07004 USA
SECRETARY, DIRECTOR	JAKE A BLAIR	40 WEST 57TH STREET, 33RD FLOOR NEW YORK, NY 10019 USA
VICE PRESIDENT	JASON PAUL MCCONNELL	4350 NORTHERN PIKE, SUITE 143 MONROEVILLE, PA 15146 USA
CEO, PRESIDENT	LANCE MATHIEU LACOE	4350 NORTHERN PIKE, SUITE 143 MONROEVILLE, PA 15146 USA

### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$1.0000	1,000.00	526.01

**9. 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.**

**Signed this 8 Day of May, 2023 at 4:23:45 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By JASON PAUL MCCONNELL

Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

© 2007 - 2023 State of Rhode Island  
All Rights Reserved