SOS Filing Number: 202341926870 Date: 9/27/2023 1:04:00 PM

RIS	2
State Dep	
Annual Reportion	_
→ Filing per → Filing Fee → Penalty: A 1. Entity ID Nun	•
00009953 3. Principal Office	}
1587 Post F 4. NAICS Code	
811111 5. State of Incom	7
7. List ALL office President Name	е
Street Address	
City Warwick Secretary Name	
Street Address	_

of Rhode Island n

Department of S	tate - B	usiness	Services	Divisio
Report for the year:	2023	Ame	nded	

iod: February 1 - May 1

e: \$50.00 Additional \$25.00 foo if form is not filed by May 31

R.I. DEPT. OF STAT BUS SVCS DIV	·

→ Penalty: Additional \$2	5.00 fee if form is r	not filed by May 31.			1 6 51 10 1		
1. Entity ID Number 000099537	2. Exact nan	ne of the Corporation Ito Repair, Inc					
3. Principal Office Address 1587 Post Road			City Warwick	State RI	Zip 02888		
4. NAICS Code 811111	6. Brief desc Auto rep	•	ler of business conducted in	Rhode Island			
5. State of Incorporation							
7. List ALL officers (names ar	nd addresses)		Che	ck the box to indicate a	n attachment 🗹		
President Name James J. Paiva			Vice-President Name Katie A. Paiva				
Street Address 1587 Post	Road		Street Address 1587 Pc	Street Address 1587 Post Road			
City Warwick	State RI	^{Zip} 02888	City Warwick	State RI	Zip 02888		
Secretary Name James J. Paiva			Treasurer Name Katie A. Paiva				
Street Address 1587 Post Road		Street Address 1587 Post Road					
City Warwick	State RI	^{Zip} 02888	City Warwick	State RI	^{Zip} 02888		
8. List ALL directors (names	and addresses)			eck the box to indicate a	n attachment [
Director Name James J. Paiva			Director Name Katie A. Paiva				
Street Address 1587 Post	Road	<u> </u>	Street Address 1587 Po	st Road			
^{City} Warwick	State RI	^{Zip} 02888	City Warwick	State RI	Zip 02888		
Director Name	•	•	Director Name	•	•		
Street Address			Street Address				
City	State	Zip	City	State	Zip		
9. Shares Authorized	 	10. Shares Iss		eck the box to indicate a			
This Information is currently o Department of State.	ly of record in the NJMBER OF		common	ASS/SERIES NO	PAR VALUE PAR		
Changes require an additional	additional filing.		-				
11. This report must be exect beiver or trustee, this report r Under penalty of perjury, I	must be executed or declare and affirm	n behalf of the corporate that I have examine	ration by the receiver or trust ed this report, including an	ee,			
statements, and that all sta Name of Authorized Represe		d herein are true an	d correct.	Date			
James J. Paiva, Pres	sident			9-26	6-23		
Signature of Authorized Repr	•	· · · · · · · · · · · · · · · · · · ·	EU ED				
MAIL TO:	7 Presid	ent	FILED				
NAIL TO: Division of Business Services			SEP 97 2023				

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

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

FORM 630- Revised: 04/2023

Attachment to 2023 Amended Annual Report for Elite Auto Repair, Inc. (ID No. 000099537)

7. Additional Officer(s):

Assistant Secretary: S

Simon Ahmadian 1587 Post Road Warwick, RI 02888 RI SOS Filing Number: 202341926870 Date: 9/27/2023 1:04:00 PM



I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

September 27, 2023 01:04 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

