



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
Corporation

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP

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R.I. DEPT. OF STATE
BUS SVCS DIV

2024 JAN 22 12 30

1. Entity ID Number <u>17463</u>		2. Exact name of the Corporation <u>Westminster Motors LTD</u>	
3. Principal Office Address <u>550 Valley ST</u>		City <u>Providence</u>	State <u>RI</u>
Zip <u>02908</u>			
4. NAICS Code <u>441120</u>		6. Brief description of the character of business conducted in Rhode Island	
5. State of Incorporation <u>RI</u>		<u>Sales Use Cars</u>	
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name <u>MERY LOPEZ</u>		Vice-President Name	
Street Address <u>59 Redwing ST</u>		Street Address	
City <u>Providence</u>	State <u>RI</u>	Zip <u>02907</u>	City <u>Same</u>
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	City
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
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City
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/SERIES	
		<u>100</u>	<u>CNP</u>
			<u>0</u>
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 <u>MERY LOPEZ</u>		Date <u>1/22/24</u>	
Signature of Authorized Representative <u>Mery Lopez</u>		FILED <u>1230</u>	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

JAN 22 2024
BY 79224