State of Rhode Island         Fee: \$50.00           Office of the Secretary of State         Office
Division Of Business Services
148 W. River Street
Providence RI 02904-2615 (401) 222-3040
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 YEAR 2024: 2024
1. Corporate ID No. 000442162
2. Name of Corporation <u>ABC Rental &amp; Leasing, Inc.</u>
3. Street Address Principal Business Office:
No. and Street: 44 TERRY LANE
City or Town:CHEPACHETState: RIZip: 02814Country: USA
4. Business Phone No.
<u>4015687700</u>
5. State of Incorporation
State: <u>RI</u>
NAICS CODE
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.
<u>532111</u>
6. Brief Description of the Character of Business Conducted in Rhode Island
RENTAL AND LEASING OF AUTOMOBILES AND LIGHT TRUCKS
7. Names and Addresses of the Officers and Directors:
All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix		Address Address, City or Town, State, Zip Code, Country		
PRESIDENT	GREGORY GABEL		44 D TERRY LANE CHEPACHET, RI 02814 USA		
OTHER OFFICER	AUTO BODY CONCEPTS		44 TERRY LANE		
Shares Authorized and	ssued				
Class of Stock	Series of Stock	Par Value Per Share		Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
		\$0.0100			
STK	cuted on behalf of the			8,000.00	entative. If
. This report must be exe he corporation is in the	hands of a receiver e receiver or trustee. wary, 2024 at 9:52:	e corpora or trustee 35 AM. 7	tion by an e, this rep This electre	8,000.00 a authorized repres ort must be execut onic signature of th	entative. If and on behalf the individual

Form No. 630 Revised 09/07

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