



**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.

JAN 31 2024
6940 a

1. Entity ID Number 000132019		2. Exact name of the Corporation D'AGOSTINO MOTORS, LTD.			
3. Principal Office Address 411 DOUGLAS PIKE			City SMITHFIELD	State RI	Zip 02917
4. NAICS Code 811490		6. Brief description of the character of business conducted in Rhode Island THE PURCHASE AND SALE OF NEW AND USED EQUIPMENT			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name PAUL R. D'AGOSTINO			Vice-President Name CHRISTOPHER D'AGOSTINO		
Street Address 411 DOUGLAS PIKE			Street Address 411 DOUGLAS PIKE		
City SMITHFIELD	State RI	Zip 02917	City SMITHFIELD	State RI	Zip 02917
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name PAUL R. D'AGOSTINO			Director Name CHRISTOPHER D'AGOSTINO		
Street Address 411 DOUGLAS PIKE			Street Address 411 DOUGLAS PIKE		
City SMITHFIELD	State RI	Zip 02917	City SMITHFIELD	State RI	Zip 02917
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		PAR VALUE			
		300	COMMON	0.00	
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. <i>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.</i>					
Name of Authorized Representative CHRISTOPHER D'AGOSTINO - VICE PRESIDENT				Date 1-27-2024	
Signature of Authorized Representative 					

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov