



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.

FILED

FEB 05 2024

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1. Entity ID Number 000719749		2. Exact name of the Corporation J & D AUTO SALES, INC.	
3. Principal Office Address 4 Bridal Avenue		City West Warwick	State RI
		Zip 02893	
4. NAICS Code 483530		6. Brief description of the character of business conducted in Rhode Island auto sales and salvage	
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Michael Cavanaugh		Vice-President Name Michael Cavanaugh	
Street Address 4 Bridal Avenue		Street Address 4 Bridal Avenue	
City West Warwick	State RI	City West Warwick	State RI
Zip 02893		Zip 02893	
Secretary Name Michael Cavanaugh		Treasurer Name Michael Cavanaugh	
Street Address 4 Bridal Avenue		Street Address 4 Bridal Avenue	
City West Warwick	State RI	City West Warwick	State RI
Zip 02893		Zip 02893	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Michael Cavanaugh		Director Name	
Street Address 4 Bridal Avenue		Street Address	
City West Warwick	State RI	City	State
Zip 02893		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
		NUMBER OF SHARES	CLASS/SERIES
		none	
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 MICHAEL CAVANAUGH			Date 2-1-24
Signature of Authorized Representative			

MAIL TO:
Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov