



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.

REC'D RI SOS 250  
24 MAR 12 PM 12:46:50

1. Entity ID Number <b>001764055</b>		2. Exact name of the Corporation <b>Ocean State Auto Group, Inc.</b>			
3. Principal Office Address <b>1300 Eddle Dowling Highway</b>			City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
4. NAICS Code <b>441110</b>		6. Brief description of the character of business conducted in Rhode Island <b>Operate an auto sales business, any ancillary purposes, and all other lawful purposes.</b>			
5. State of Incorporation <b>RI</b>					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name <b>Junye Liu</b>			Vice-President Name		
Street Address <b>1300 Eddle Dowling Highway</b>			Street Address		
City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>	City	State	Zip
Secretary Name <b>Junye Liu</b>			Treasurer Name <b>Junye Liu</b>		
Street Address <b>1300 Eddle Dowling Highway</b>			Street Address <b>1300 Eddle Dowling Highway</b>		
City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State.		Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
		<b>100</b>	<b>Common Shares</b>	<b>0.01 par value</b>	
Changes require an additional filing.					
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 <b>Junye Liu</b>				Date <b>3/5 2024</b>	
Signature of Authorized Representative 				<b>FILED</b>	

MAR 12 2024  
BY 19575560517  
A.R