



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  
MAR 19 2024  
BY 6043

1. Entity ID Number 106552		2. Exact name of the Corporation D&K PITCHER'S AUTO SALVAGE, INC.			
3. Principal Office Address 214 BOSTON NECK ROAD			City NO. KINGSTOWN	State RI	Zip 02852
4. NAICS Code 811198		6. Brief description of the character of business conducted in Rhode Island To engage in the purchase, repair, sale and towing of passenger and commercial vehicles, parts, accessories and related items.			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name DEREK R. BROOME			Vice-President Name DEREK R. BROOME		
Street Address 214 BOSTON NECK ROAD			Street Address 214 BOSTON NECK ROAD		
City NO. KINGSTOWN	State RI	Zip 02852	City NO. KINGSTOWN	State RI	Zip 02852
Secretary Name DEREK R. BROOME			Treasurer Name DEREK R. BROOME		
Street Address 214 BOSTON NECK ROAD			Street Address 214 BOSTON NECK ROAD		
City NO. KINGSTOWN	State RI	Zip 02852	City NO. KINGSTOWN	State RI	Zip 02852
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name DEREK R. BROOME			Director Name		
Street Address 214 BOSTON NECK ROAD			Street Address		
City NO. KINGSTOWN	State RI	Zip 02852	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		PAR VALUE
			200	COMMON	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. <b>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.</b>					
Name of Authorized Representative DEREK R. BROOME, PRESIDENT				Date 3-7-24	
Signature of Authorized Representative 					

MAIL TO:  
Division of Business Services  
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