



**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.

2024 APR 17 PM 2:22

1. Entity ID Number 000130791		2. Exact name of the Corporation P. C. Mart Inc.			
3. Principal Office Address 408 Douglas Avenue			City Providence		State RI
			Zip 02908		
3. NAICS Code 447100		4. Brief description of the character of business conducted in Rhode Island Service station/Garage			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Mohammed Hachem			Vice-President Name		
Street Address 1245 Chalkstone Avenue			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
Secretary Name Bassam Janoudi			Treasurer Name Yaser Janoudi		
Street Address 135 Rosemere Rd			Street Address 16 Church St		
City Pawtucket	State RI	Zip 02861	City West Warwick	State RI	Zip 02893
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
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 <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
			1000	common	1000
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 Mohammed Hachem				Date APR 17 2024	
Signature of Authorized Representative				3-11-24	
				BY <u>4862</u> <u>KS</u>	