RI SOS Filing Number: 202452512960 Date: 4/24/2024 2:11:00 PM

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State of Rhode Island Department of State - Business Services Division						ECO APR		
						SEAMP		
Annual Report for the year: 202니								
Corporation						Š S OR		
Filing period: February 1 - May 1						SEC SANTO OF STATE		
→ Filing Fee: \$50.00						<u> </u>		
→ Penalty: Additional \$25.00						N		
Entity ID Number	2. Exact name of the Corporation							
000507208	SANTANA AUTO BODY, INC							
3. Principal Office Address				City State Zip				
289 THURBERS AVENUE				PROVIDENCE		0290)5	
4. NAICS Code	Brief description of the character of business conducted in Rhode Island							
811121	AUTO REPAIR Title: 7-1.2-1701							
5. State of Incorporation	AOTO RELAIN THE. 1-1.2-1101							
RI								
7. List ALL officers (names and ad	dresses)			Check th	e box to indi	cate an attachmen	ij	
President Name RICHARD HILARIO			Vice-President Name					
Street Address 29 LILLIAN AVENUE			Street Address					
PROVIDENCE	State RI	^{Z_{ip}} 02905	City		State	Zip		
Secretary Name			Treasurer Name					
Street Address				Street Address				
City	State	Zip	City		State	Zip		
8. List ALL directors (names and a	ddresses)	· - ·	<u> </u>	Check th	ne box to indi	cate an attachmen		
Director Name			Director Name					
Street Address			Street Add	Street Address				
City	State	Zip	City	City		Zip		
Director Name	Director Name			-				
Street Address				Street Address				
City	State	Zip	City		State	Zip		
9. Shares Authorized	<u> </u>	10. Shares Issu	ied	Check t	he box to ind	icate an attachmen	ı 🗆	
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES CLASS/S			PAR VALUI		
		500				0.01		
								
11. This report must be executed of					orporation is	I in the hands of a re	e-	
ceiver or trustee, this report must I Under penalty of perjury, I decla	re and affirm ti	hat I have examine	d this repor		companying	schedules and	\dashv	
statements, and that all statements Name of Authorized Representative	i correct.		Date					
CESAR HILARIO	•				4/24/24			
Signature of Authorized Representative				01	L L		\dashv	
Ceson Hila	w.			FILED 21	1]	
MAIL TO:								

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov APR 2 4 2024