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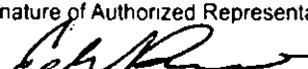


**State of Rhode Island  
Department of State - Business Services Division**

**Annual Report for the year: 2014**

**Corporation**

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

|   |                 |   |   |                           |                     |
|---|-----------------|---|---|---------------------------|---------------------|
| 1. Entity ID Number<br><b>39626</b>   |                 | 2. Exact name of the Corporation<br><b>MARINE &amp; AUTO SAVINGS, INC.</b>  |   |                           |                     |
| 3. Principal Office Address<br><b>193 THURNERS AVENUE</b>   |                 |   | City<br><b>PROVIDENCE</b>                 | State<br><b>RI</b>        | Zip<br><b>02905</b> |
| 4. NAICS Code<br><b>453990</b>  |                 | 6. Brief description of the character of business conducted in Rhode Island<br><b>BUYING AND SELLING OF FISHING EQUIPMENT AND GEAR.</b> |   |                           |                     |
| 5. State of Incorporation<br><b>RHODE ISLAND</b>  |                 |   |   |                           |                     |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                 |   |   |                           |                     |
| President Name <b>ANTONIO A. PIRES</b>  |                 |   | Vice-President Name <b>EDITE C. PIRES</b> |                           |                     |
| Street Address <b>198 RHODES STREET</b>   |                 |   | Street Address <b>198 RHODES STREET</b>   |                           |                     |
| City <b>PROVIDENCE</b>  | State <b>RI</b> | Zip <b>02903</b>  | City <b>WARWICK</b>                       | State <b>RI</b>           | Zip <b>02889</b>    |
| Secretary Name <b>EDITE C. PIRES</b>  |                 |   | Treasurer Name <b>EDITE C. PIRES</b>      |                           |                     |
| Street Address <b>121 ETON AVENUE</b>   |                 |   | Street Address <b>198 RHODES STREET</b>   |                           |                     |
| City <b>PROVIDENCE</b>  | State <b>RI</b> | Zip <b>02903</b>  | City <b>PROVIDENCE</b>                    | State <b>RI</b>           | Zip <b>02903</b>    |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                 |   |   |                           |                     |
| Director Name <b>ANTONIO A. PIRES</b>   |                 |   | Director Name <b>EDITE PIRES</b>          |                           |                     |
| Street Address <b>198 RHODES STREET</b>   |                 |   | Street Address <b>198 RHODES STREET</b>   |                           |                     |
| City <b>PROVIDENCE</b>  | State <b>RI</b> | Zip <b>02903</b>  | City <b>PROVIDENCE</b>                    | State <b>RI</b>           | Zip <b>02903</b>    |
| 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.<br><br>Changes require an additional filing.  |                 | NUMBER OF SHARES  |   | CLASS/SERIES              | PAR VALUE           |
|   |                 | <b>100</b>  |   | <b>COMMON</b>             | <b>NO PAR</b>       |
| 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<br><b>EDITE C. PIRES</b>  |                 |   |   | Date<br><b>06-24-2024</b> |                     |
| Signature of Authorized Representative<br>   |                 |   |   | <b>AUG - 8 2024</b>       |                     |

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 BY A0156m

**MAIL TO:**  
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