



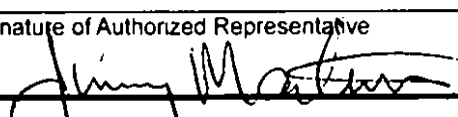
State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

FILED *DL*  
 APR 23 2025  
 BY 14610  
 RECEIVED STAMP  
 I. DEPT. OF STATE  
 BUS SVCS

Annual Report for the year: 2024  
 Corporation \_\_\_\_\_

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

2025 APR 23 A 11:16

1. Entity ID Number <b>74422</b>		2. Exact name of the Corporation <b>Coastal Collision &amp; Towing, Inc.</b>			
3. Principal Office Address <b>540 Pawtucket Avenue</b>			City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
4. NAICS Code <b>44-45 - Retail Trade</b>		6. Brief description of the character of business conducted in Rhode Island <b>Buying and selling used automobiles and retail; collision repairing, towing services</b>			
5. State of Incorporation <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>Jimmy Martins</b>			Vice-President Name <b>Dawn Martins</b>		
Street Address <b>540 Pawtucket Avenue</b>			Street Address <b>540 Pawtucket Avenue</b>		
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
Secretary Name <b>Olivia Martins</b>			Treasurer Name <b>Olivia Martins</b>		
Street Address <b>540 Pawtucket Avenue</b>			Street Address <b>540 Pawtucket Avenue</b>		
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</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>Jimmy Martins</b>			Director Name		
Street Address <b>540 Pawtucket Avenue</b>			Street Address		
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	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		PAR VALUE
			<b>1,000</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 <b>Jimmy Martins</b>					Date <b>4.18.25</b>
Signature of Authorized Representative 			SIGN DOCUMENT HERE		