

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

Form 630 Rev. 12/06

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - M * In accordance with R.I.G.L. 7- law (R.I.G.L. 7-1.2-1501(c&d)) i	1.2-1501(e), each corp	oration failing or refusin	ORT MUST BE TYPED ig to file its annual report with	OR PRINTED LEGI lbin tbirty (30) days aft	BLY IN BLACK INK er the time prescribed by
1. Corporate ID No.	2. Name of Corporation				
92826	Allied Auto Driving School, Inc.				
3. Street Address Principal Business Office 200 Ausdale Road			Cay Cranston	State RI	24p 02910
4. Business Phone No. 5. State of Incorporation (401) 944–9356 Rhode Islan			đ		
6. Brief Description of the Character	of Business Conducted in F	bode Island			
To operate a driv 7. NAMES AND ADDRESSES President Name			CHMENT) TELL IN SPA	ACES BEFORE USING	ATTACHMENTS
Richard T. McCann, Jr.			Alice B. McCann		
Street Address 200 Ausdale Road			Street Address 200 Ausdale Road		
City	State	Zip	Clty	State	Zip
Cranston	RI	02910	Cranston	RI	02910
Secretary Name Donna L. McCann			Treasurer Name Michael T. McCann		
Street Address 200 Ausdale Road			Street Address 80 Tomahawk Trail		
Cranston	State RI	2φ 02910	Cranston	State RI	^{Ζφ} 02921
8. NAMES AND ADDRESSES	OF THE DIRECTOR	' S: <i>("X" BOX FOR ATT</i>	: <i>'ACHMENT</i>) [□ FILL IN S	 PACES BEFORE USING	G ATTACHMENTS
Director Name Richard T. McCani	* * * * * * * * * * * * * * * * * * *		Director Name Alice B. McC		
Street Address 200 Ausdale Road			Street Address 200 Ausdale Road		
City	State	Zφ	City	State	Zip
Cranston	RI	J 02910	cranston	RI	02910
Donna L. McCann			Director Name Michael T. M		
Street Address 200 Ausdale Road			Street Address 80 Tomahawk Trail		
Cranston	State RI	02910	City Cranston,	State RI	<i>Σφ</i> 02921
9. SHARES AUTHORIZED (* AUTHORIZED SHARES	"X" BOX FOR ATTAC	CHMENT)	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares Class/Series Par Value			Number of Shares	Class/Series	Par Value
100 No Par Value			None		
					
This report must be executed this report must be executed of				poration is in the hands	s of a receiver or trustee,
		I	1 7 7	anying schedules and sta	hat I have examined this report tements, and that all statements
File Date FILED	·		Suporta		1/2/2008
Check No JAN 0.3 2008			Signature / Date Richard T. McCann, Jr.		
By: By 337/			Print or Type Name		
			President		

Title