



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 35957		2. Exact name of the Corporation INTOWN PARKING INC			
3. Principal office address 1 Fulton St Ste 601		City Providence	State R.I.	Zip 02903	
4. Business Phone No. 1 Fulton Street Ste 601		5. State of Incorporation R.I.			
6. Brief description of the character of business conducted in Rhode Island PARKING					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT)					
President Name THOMAS COCCI		Vice-President Name THOMAS COCCI			
Street Address 1 Fulton St. Suite 601		Street Address SAME			
City Providence	State R.I.	Zip 02903	City	State	Zip
Secretary Name SAME AS ABOVE		Treasurer Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT)					
Director Name		Director Name			
Street Address SAME AS ABOVE		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 (X BOX FOR ATTACHMENT)		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES 600	CLASS/SERIES	PAR VALUE

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 CORPORATIONS DIV
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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.

File Date: _____
 Check No: _____
 By: _____
 FOR SECRETARY OF STATE USE ONLY

FILED 1231
JUN 21 2013
DL 199960

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.

Thomas Cocci
 Signature of Authorized Representative
6/21/13
 Date

THOMAS COCCI
 Print or Type Name of Authorized Representative