

## 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.

6. Brief description of the character of business conducted in Rho Serving of general public in a taxicab business  7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BO) President Name None at the present time  Street Address  City State Zip  Secretary Name Donaid Sousa  Street Address  166 Central Avenue  City East Providence RI Zip  02914  LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BO) Director Name Edmund Sousa  Street Address  99 Sutton Avenue  City State Zip  02914  Director Name Edmund Sousa	FOR ALTIACHMENT)  Vice-President Name Edmund Sous  Street Address 99 Sutton Ave  City East Providen  Treasurer Name Donald Sousa  Street Address 166 Central Ave  City East Providen	ration  me sa enue  sca enue  state RI  a  venue ·  State RI	Zip 02914  Zip 02914  Zip 02914	
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SHARESAUTHORIZED	10 SHARES ISSUE	ED ("X" BOX FOR ATTA	ACHMENT)	
	NUMBER OF SHARES	CLASS/SERIES		
nis information is currently of record in the Office of the Seci State. Changes require an additional filing. se Section 9 of instruction sheet.	etary 100			
This report must be executed on behalf of the corporation by an a this report must be executed on b		1	1	

File Date	FILED	Under penalty of perjury, I declare and affirm that I have this report, including any accompanying schedules are and that all statements contained herein are true and the contained herein are true are true and the contained herein are true are t	
Check No.	JUL 15 2013	Ximad Sousa	1 1
A. E. Y. C.	00 -	Signature of Authorized Representative	Date
FOR SECRETARY OF STATE USE ONLY	STATE OF THE PARTY	Donald Sousa, Secretary/Treasurer	
Form No. 630		Print or Type Name of Authorized Representative	

Form No. 630 Revised: 01/2012