



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2022
Corporation

STAMP
 FEB 16 2022
 B: [Handwritten initials]

- 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 11668		2. Exact name of the Corporation Simplex Engine & Machine, Inc.			
3. Principal Office Address 1011 Westminster Street			City Providence	State RI	Zip 02903-0000
4. NAICS Code 811111		6. Brief description of the character of business conducted in Rhode Island buying, selling, repairing and rebuilding automotive parts			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Stephen M. Clair			Vice-President Name Bradford J. Clair		
Street Address 1011 Westminster Street			Street Address 1011 Westminster Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Bradford J. Clair			Treasurer Name Stephen M. Clair		
Street Address 1011 Westminster Street			Street Address 1011 Westminster Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Stephen M. Clair			Director Name Bradford J. Clair		
Street Address 1011 Westminster Street			Street Address 1011 Westminster Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Director Name Donald F. Clair			Director Name none		
Street Address 1011 Westminster Street			Street Address none		
City Providence	State RI	Zip 02903	City none	State none	Zip none
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
		100	Common	No Par	
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. 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.					
Name of Authorized Representative Stephen M. Clair				Date 1/04/2022	
Signature of Authorized Representative <i>Stephen M. Clair</i>					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov