RI SOS Filing Number: 202326254460 Date: 1/19/2023 4:00:00 PM State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:

S (A 32

Corporation	2023
→ Filing period: February 1 - M	

→ Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number	2. Exact name of	2. Exact name of the Corporation						
11668	Simplex Engine & Machine, Inc.							
3. Principal Office Address	Silibica	City			State	Zıp		
					RI	02903-0000		
1011 Westminster S 4. NAICS Code	treet 6 Brief description	on of the character		ovidence	1	02903-0000		
4. WAICO COde	· ·	Brief description of the character of business conducted in Rhode Island						
811111	buying, sel	buying, selling, repairing and rebuilding automotive parts						
5. State of Incorporation								
RI								
7. List ALL officers (names and ad	dresses)			Check th	ne box to indicate	e an attachment 🔲		
President Name	<u> </u>		Vice-President Name					
Stephen M. Clair			Bradford J. Clair					
Street Address			Street Address					
1011 Westminster City	Street State	Zip	City _	Westminster Street	Tetale	I Zin		
Providence	RI	02903-	Provi	dence	State RI	Zip 02 903-		
Secretary Name		Treasurer Name				1		
Bradford J. Clair				Stephen M. Clair				
Street Address 1011 Westminster Street		Street Address 1011 Westminster Street						
City Providence	State RI	Zip 02903-	^{City} Provid	ence	State	4)2903-		
8. List ALL directors (names and addresses) Check the box to indicate an attachment								
			Director Name Bradford J. Clair					
Street Address 1011 Westminster Street			Street Address 1011 Westminster Street					
City Providence	State RI	Zip 02903-	City Provid	ence	State RI	Zip 02903-		
Director Name Donald F. Clair			Director Magne					
Street Address 1011 Westminster Street			Street Address					
City Providence	State RI	Zip 02903-	City none		State none	Zip ^{none}		
9. Shares Authorized	<u> </u>	10. Shares Issued Che		Check to	ck the box to indicate an attachment			
		NUMBER OF S			•	PAR VALUE		
Department of State.		100	1	Common		lo Par		
Changes require an additional filing.								
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 Representati	·			•	Date 1/04/2023			
Stephen M. Clair	President			1				
Signature of Authorized Representative								

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri gov