

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(cord)) is

subject to a penalty fee of \$25,00.						
1 Corporate ID No. 21361	2. Name of Corporation J & M Diamond Tool, Inc.					
3. Street Address Principal Business Office 43 ROGER WILLIAMS AVENUE			City EAST PROVIDENCE	State RI	^{Zip} 02914	
4. Business Phone No. 5. State of Incorporation Rhode Island						
6. Brief Description of the Character of Tool Manufacturing			Manage Manage	MINIOUS INC. 1	***************************************	
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) FILL IN SPAC	ES BEFORE USING ATT	TACHMENTS	
President Name			Vice President Name			
Leo R. Mongeau			Richard L. Mongeau			
Street Address 100 Pequot Road			Street Address 8 2nd Street			
city Pawtucket	State RI	<i>Zi</i> р 0286 1	City Pawtucket	State RI	^{Zip} 02881	
Secretary Name Denise L. Drury			Treasurer Name Leo R. Mongeau			
Street Address Cherry Lane			Street Address 100 Pequot Road			
Rehoboth	State MA	^{Ζψ} 02169	City Pawtucket	State RI	^{Zip} 02861	
8. NAMES AND ADDRESSES	OF THE DIRECTORS	S: ("X" BOX FOR ATT	ACHMENT) [FILL IN SPA	CES BEFORE USING A	TTACHMENTS	
Director Name Leo R. Mongeau			Director Name Pauline M. Mongeau			
Street Address 100 Pequot Road			Street Address 100 Pequot Road			
City	State	Ζίγ	City	State	Zip	
Pawtucket	RI	02861	Pawtucket	RI	02861	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	$C\mu_{V}$	State	Zip	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
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	Class/Series	Par Value	
			10,000	Common	No Par Value	
This report must be executed this report must be executed or	on behalf of the corpo	oration by an authorized ration by the receiver of	d representative. If the corpor or trustee.	ration is in the hands of	a receiver or trustee,	

File Date _		ED-		
	114	LL		200
Check No	MAY 9	7 2009		
	WiAi D	1 2000		1,3
Ву:	Bv /0	33.	3	 .
FC	R SECRETARY	OF STATE U	SE ONLY	

Under penalty of perjury, I declare and affirm the	nat I have examined this report,
including any accompanying schedules and stat	ements, and that all statements
confained herein are type and correct.	
Denius & Rure	5/25/09
Signature	Date /
Denise L. Drury	
Print or Type Name	
Secretary	
Title	_