



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2611  
401.222.3044

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011**

**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(c&d)) 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 Ave.		City East Providence	State RI	Zip 02916
4. Business Phone No. 401-431-2220		5. State of Incorporation RI		

6. Brief Description of the Character of Business Conducted in Rhode Island  
tool manufacturing

**7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Leo R. Mongeau			Vice President Name Richard L. Mongeau		
Street Address 100 Pequot Rd.			Street Address 8 Second St.		
City Pawtucket	State RI	Zip 02861	City Pawtucket	State RI	Zip 02861
Secretary Name Denise L. Drury			Treasurer Name Leo R. Mongeau		
Street Address 10 Cherry Ln.			Street Address 100 Pequot Rd.		
City Rehobeth	State MA	Zip 02769	City Pawtucket	State RI	Zip 02861

**8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Leo R. Mongeau			Director Name Pauline M. mongeau		
Street Address 100 Pequot Rd.			Street Address 100 Pequot Rd.		
City Pawtucket	State RI	Zip 02861	City Pawtucket	State RI	Zip 02861
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip

**9. SHARES AUTHORIZED**

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.

**10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)**

ISSUED SHARES — THIS SECTION **MUST BE COMPLETED**

Number of Shares	Class/Series	Par Value
10000	Common	No Par Value
THIS SECTION <b>MUST BE COMPLETED</b>		

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.

**FILED**

File Date FEB 23 2011

Check No. By [Signature]

By 012609

FOR SECRETARY OF STATE USE ONLY

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.

Signature [Signature] Date 2/18/11

Print or Type Name Leo R. Mongeau

President

Title