



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 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

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. 00159398		2. Name of Corporation ADT/Diversity Inc.			
3. Street Address Principal Business Office 5 New Industrial Way			City Warren	State RI	Zip 02885
4. Business Phone No. 401 245-5560		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island Tool & Die Manufacturing					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Enzo Lucciola			Vice President Name		
Street Address 20 Meadow View Blvd			Street Address		
City North Providence	State RI	Zip 02904	City	State	Zip
Secretary Name Pina Lucciola			Treasurer Name Enzo Lucciola		
Street Address 114 Savoie St			Street Address 20 Meadow View Blvd		
City Fall River	State MA	Zip 02720	City North Providence	State RI	Zip 02904
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Enzo Lucciola			Director Name		
Street Address 20 Meadow View Blvd			Street Address		
City North Providence	State RI	Zip 02904	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
5,000		0.01	5,000		0.01

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

JUN 22 2012

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.

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

2747

Signature: Enzo Lucciola Date: 6-18-12

Enzo Lucciola 6/18/12
Print or Type Name
President
Title