

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of Stat Corporations Divisio 148 W. River Stree Providence, RI 02904-261 401 222 304

401.222.304 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008 iling 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 ne (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00. 2. Name of Corporation Ridgetop Precision. State City . Street Address Principal Business Office 02816 Coventry 18 Grandview Avenue 5. State of Incorporation . Business Phone No. RHODE ISLAND (401) 826-2545 . Brief Description of the Character of Business Conducted in Rhode Island The manufacturer of metal products. . NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name resident Name Kerilyn Connell Janet S. Connell Street Address treet Address 17 Biscuit Hill Road 17 Biscuit Hill Road Zip State City Z(p)State lity]__02825_____ 02825 Foster Poster Treasurer Name ecretary Name Frank L. Connell Frank L. Connell Street Address Treet Address 17 Biscuit Hill Road 17 Biscuit Hill Road ZipC(t)State Tity 02825 02825 RT I. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Foster Director Name Director Name None Street Address Street Address City Zip State City Director Name Street Address Street Address Zip State City Ζίυ State City 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)). SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED **AUTHORIZED SHARES** Par Value Class/Series Number of Shares Par Value Class/Series Number of Shares no par value 8000 COMMOD 8000 no par value 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 repor including any accompanying schedules and statements, and that all statement contained herein are true and correct. File Date Signature Check No. Frank L. Connell

Print or Type Name

Title

Secretary-Treasurer