



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 2008

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. 5776		2. Name of Corporation Dortek Manufacturing, Inc.			
3. Street Address Principal Business Office 70 Vineyard Street			City Pawtucket	State Rhode Island	Zip 02860
4. Business Phone No. 401-728-2020		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island General Manufacturing					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Alan Kantorski			Vice President Name Alan Kantorski		
Street Address 70 Vineyard Street			Street Address 70 Vineyard Street		
City Pawtucket	State Rhode Island	Zip 02860	City Pawtucket	State Rhode Island	Zip 02860
Secretary Name Alan Kantorski			Treasurer Name Alan Kantorski		
Street Address 70 Vineyard Street			Street Address 70 Vineyard Street		
City Pawtucket	State Rhode Island	Zip 02860	City Pawtucket	State Rhode Island	Zip 02860
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Alan Kantorski			Director Name		
Street Address 70 Vineyard Street			Street Address		
City Pawtucket	State Rhode Island	Zip 02860	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
1,000 COMM	NO PAR VALUE		100	Common	No Par

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.

FILE

File Date: **MAR 17 2008**

Check No.:

By: **MD 52803**

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: *Alan Kantorski* Date: **1-4-07**

Alan Kantorski
Print or Type Name
President
Title