



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. 82469		2. Name of Corporation Natale & Sons Castings, Inc.			
3. Street Address Principal Business Office 441 Niantic Avenue		City Cranston	State RI	Zip 02910	
4. Business Phone No. 401-467-4744		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Jewelry Casting					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Caroline S. Natale		Vice President Name Caroline S. Natale			
Street Address 66 Roger Williams Circle		Street Address 66 Roger Williams Circle			
City Cranston	State RI	Zip 02905	City Cranston	State RI	Zip 02905
Secretary Name Anthony J. Natale		Treasurer Name Joseph J. Natale			
Street Address 224 Country Lane		Street Address 145 Fox Ridge Drive			
City Glastonbury	State CT	Zip 06073	City Cranston	State RI	Zip 02921
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Joseph J. Natale		Director Name			
Street Address 145 Fox Ridge Drive		Street Address			
City Cranston	State RI	Zip 02921	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"/> AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 No Par Value			1,000		

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 29 2008
Check No.	
By	DS 10832
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: Caroline S. Natale  
Date: 1-20-08  
Caroline S. Natale  
Print or Type Name  
President  
Title