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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.	2. Name of Corporation			
106921	J.N.T. Holding Corporation			
3. Street Address Principal Business Office		City	State	Zip
117 Lucy Street		Tiverton	RI	02878
4. Business Phone No.	5. State of Incorporation			
401-624-7592	Rhode Island			

6. Brief Description of the Character of Business Conducted in Rhode Island
Designing, marketing and manufacturing machinery for industrial sewing use, for financing and capitalization of such endevors

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

President Name	Street Address	City	State	Zip
John F. Tallmadge	117 Lucy Street	Tiverton	RI	02878

Vice. President Name	Street Address	City	State	Zip
John F. Tallmadge	117 Lucy Street	Tiverton	RI	02878

Secretary Name	Street Address	City	State	Zip
John F. Tallmadge	117 Lucy Street	Tiverton	MA	02878

Treasurer Name	Street Address	City	State	Zip

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

Director Name	Street Address	City	State	Zip
John F. Tallmadge	117 Lucy Street	Tiverton	RI	02878

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
300 NO PAR VALUE		

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
300	Common	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.

[redacted]

FILED
File Date
Check No. MAR 06 2008 0544
By: By
FOR SECRETARY OF STATE USE ONLY

[redacted]

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 *Date* 2-26-08

John F. Tallmadge
Print or Type Name

[redacted] President
Title

21503-12-246625

Form 630 Rev. 12/06