

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(codd)) is subject to a penalty fee of \$25.00.

law (R.I.G.L. 7-1.2-1501(c&d))	is subject to a penalty	y fee of \$25.00.		on tonly (50) mays ag	ter the time prescriben by	
1 Corporate ID No.	2. Name of Corporati		_			
1131		e Mold & Ma	·····			
3. Street Address Principal Business Office 411 Chapel Street			City	State	Zip	
4. Business Phone No.		5. State of Incorporation	Harrisville	RI	02830	
(401) 568-3839		, ,	Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island			ISTAIIQ			
			<i>TACHMENT)</i> FILLIN SPA	CES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Richard Caya			Lori Caya			
Street Address			Street Address			
411 Chapel Street			411 Chapel Street			
City	State	Zıp	City	State	Zip	
Harrisville	RI	02830	Harrisville	RI	02830	
Secretary Name			Treusurer Name			
Richard Caya Street Address			Lori Caya Street Address			
411 Chapel Street			;			
City	State	Zip	411 Chapel St	reet State	Zıp	
Harrisville	RI	02830			· ·	
8. NAMES AND ADDRESSES	OF THE DIRECTO	RS: ("X" BOX FOR A	: Harrisville (TTACHMENT)	RI ACES BEFORE USIN	02830 NG ATTACHMENTS	
Director Name			Director Name		1 TO 1	
Richard Caya						
Street Address			Street Address			
411 Chapel Str	eet		<u> </u>			
City	State	Ζψ	City:	State	Zip	
Harrisville	RI	02830				
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	Сіцу	State	Ziμ	
9. SHARES AUTHORIZED ("X" BOX FOR ATT	ACHMENT) [10. SHARES ISSUED ("X	13.55		
Number of Shares	Class/Sories	Par Value	Number of Shares	Class/Series	Par Value	
8,000 \$.01 Par	Value		100	N/A	1¢ per shar	
This report must be executed this report must be executed			ized representative. If the corpo	oration is in the hand	ls of a receiver or trustee,	

	FILED
File Date	MAR 1 2000
Check No.	BV DQ 11750
Ву:	
FOR S	SECRETARY OF STATE USE ONLY

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.

Signature

Richard Caya

Print or Type Name

President/Secretary/Director

Tirle