RI SOS Filing Number: 200810020740 Date: 04/16/2008 4:00 PM

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			
63264	TECHNICAL SPECIALTIES, INC.			
3. Street Address Principal Business Office		City	State	Zip
74 Tupelo Street		Bristol	RI	02809
4. Business Phone No.	5. State of Incorporation			
401 245-8826	Rhode Island			

6. Brief Description of the Character of Business Conducted in Rhode Island

Provide engineering and design services

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

President Name			Vice President Name		
Duncan Colley, Jr.			Duncan Colley, Jr.		
Street Address			Street Address		
74 Tupelo Street			74 Tupelo Street		
City	State	Zip	City	State	Zip
Bristol	RI	02809	Bristol	RI	02809
Secretary Name			**Treasurer Name**		
Duncan Colley, Jr.			Duncan Colley, Jr.		
Street Address			Street Address		
74 Tupelo Street			74 Tupelo Street		
City	State	Zip	City	State	Zip
Bristol	RI	02809	Bristol	RI	02809

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

Director Name			Director Name		
None					
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

RECEIVED
2008 APR 15 AM 8:42
SECRETARY OF STATE
CORPORATIONS DIV.

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

[redacted] [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.

Duncan Colley Jr. 4-10-08
Signature *Date*

Duncan Colley, Jr.
Print or Type Name

President
Title

[redacted]

FILED
File Date
Check No. APR 16 2008
By: By 3125
FOR SECRETARY OF STATE USE ONLY

21672-33-250477

Form 630 Rev. 12/06