

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

* 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.

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1. Corporate ID No. 41004 High Tech Engineering, Inc					
3. Street Address Principal Business Office 423 Wal Cott St			Paintucker	State R I	07801
4. Business Phone No. 5. State of Incorporation					
401-723-0404 Rhode Island 6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: CX NOX FOR ATTAIN President Name			Vice President Name		
Street Address			Street Address		
3901 Flat River Rd			SPECIAL PROPERTY.		
1 The try office to the first affice access and a con-	State	02816	City	State	Zip
Secretary Nume VOWE			Treasurer Name NONL		
Street Address			Street Address		
City	State	Zip	City	State	Ζip
8. NAMES AND ADDRESSES	OF THE DIRECTOR:	S. C'X' BOX FOR ATT	ACHMENT). 🔲 FILL IN SPA	CES BEFORE USING A	TTACHMENTS
Director Name VONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	Сйу	State	Ζip
Director Name NonE			Director Name NONG		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED GOO NO PAR VAIVE			10. SHARES ISSUED ("X" BOX POR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is currently of record in the Office of the Secretary of			Number of Shares	Class/Series	Par Value
State. Changes require an additional filing. See Section 9 of instruction sheet.			600	A	0
				NEW CONTRACTOR	
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.					
Under penalty of perjury, I declare and affirm that I have examined this report					
including any accompanying schedules and statements, and that all statement contained herein are type and confect.					
File Date			Tran d		1-8-09
	collecto locasitalica so. 2 de 200as (basel de		Signature	Ū,	Date
Check No. JAN 0 9 2009			Print or Type Name		
" by 15 45 b			PRESIL	Time	
FOR SECRETARY OF STA	ID CAE CINEY		Title		