

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 2009

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.

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1. Corporate ID No. 1 0477		2. Name of Corporation Micro Electronics, Inc.					
3. Street Address Principal Business Office 1005 Newman Avenue			Ctty Seekonk	State MA	2ip 02771		
l /===:		5. State of incorpora Rhode Island	State of Incorporation Rhode Island				
6. Brief Description of the Chan Manufacturer of Fiber (*						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR President Name			ATTACHMENT) _ FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name				
Gary Perrino			Mark Perrino				
Street Address 23 Ash Street			Street Address				
City Rehoboth	State MA	<i>Ζιρ</i> 0276 9	-City .	State	Zip		
Secretary Name Jodie Perrino			Treasurer Name Gary Perrino				
Street Address			Street Address 23 Ash Street				
City	State	Ζίρ	City Rehoboth	State MA	^{Zip} 02769		
8. NAMES AND ADDRES Director Name	SES OF THE DIRI	CTORS: ("X" BOX FO	R ATTACHMENT) TFILL 1 Director Name	n spaces before usin	G ATTACHMENTS		
Street Address			Street Address				
City	State	Zip	Сиу	State	Zip		
Director Name			Director Name				
Street Address			Street Address				
Сиу	State	Z_{ip}	City	State	Zip		
9. SHARES AUTHORIZE AUTHORIZED SHARES	D. ("X" BOX FOR	ATTACHMENT)		 <i>("X" BOX FOR ATTAC</i> CTION <u>MUST</u> BE COMPLETED	—		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value		
200 Comm No Par Value			200	Common	No Par		
			144 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	e de la companya de l	The state of the s		
This report must be executhis report must be execu			horized representative. If the ceiver or trustee.	corporation is in the hand	s of a receiver or trustee,		

File Date	2-09
Check No. 36	87
Ву:	nnc
FOR SECRETARY OF	STATE USE ONCY

Under penalty of pe	rjury, I declare and affi	rm that I have e	xamined this report
including any accor	npanying schedules and	d statements, an	d that all statements
confained herein an	e true and correct.		1 /
Milling X	Mismoul	la: 1	17/09
Signature	9	Date 1	,
Anthony R. Mignai	nelli, Esq., Executor of	the Estate of	loseph A. Perrino
Print or Type Name			

Executor