

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

401.222.30

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(ccdd)) is

subject to a penalty fee of \$25.00.	•====				
1. Corporate ID No. 6669	2. Name of Corporation MALSCH BROTHERS CORPORATION				
3. Street Address Principal Business Office 69 FENNER STREET			CRANSTON	State RI	<i>Ζι</i> ρ 02910
4. Business Phone No. (401) 941-0140 5. State of Incorporation RHODE ISLAND					
6. Brief Description of the Character of RESELLER OF COMMERC			NS		
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name ARTHUR G. JOHNSTON			CHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name		
Street Address P.O. BOX 7283			Street Address		
City WARWICK	State RI	^{Zip} 02888	Сйу	State	Zip
Secretary Name ARTHUR G. JOHNSTON			Treasurer Name ARTHUR G. JOHNSTON		
Street Address P.O. BOX 7283			Street Address P.O. BOX 7283		
WARWICK	State R1	^{Zip} 02888	City WARWICK	State RI	^{Zip} 02888
8. NAMES AND ADDRESSES Director Name ARTHUR G. JOHNSTON		S: ("X" BOX FOR ATT	TACHMENT) FILL II Director Name	N SPACES BEFORE USING	G ATTACHMENTS
Street Address P.O. BOX 7283			Street Address		
City WARWICK	State RI	Zip 02888	City	State	Zip
Director Name	•		Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR 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. This report must be executed on behalf of the corporation by an authorize			5,000	COMMON	\$1.00
			TC-L		
This report must be executed this report must be executed of				corporation is in the nands	s of a receiver or trustee,
		_	including any acc	perjury, I declare and affirm to ompanying schedules and sta	
File Date / 4/3	-09		Signature Date Thurs Many		
Check No	24		Signature / [FRIHL	12 G. Jo	MUSTON
Ву:	nc_		Print or Type Nam	e 1750 T	
FOR SECRETARY OF STA	ATE USE ONLY		Title		Form 630 Rev. 08/08