

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222,3040

2009 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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(e&d)) is

subject to a penalty fee of \$25,00.						
I. Coporate ID No. 67611	2. Name of Corporation Oilchem, Inc.					
3. Street Address Principal Business Office 50 Industrial Circle			City Lincoln	State RI	χφ 02865	
4. Business Phone No. 4017222410 5. State of Incorporation Massachusetts						
6. Brief Description of the Character of Business Conducted in Rhode Island SALE AND DISTRIBUTION OF CHEMICAL MATERIALS						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Walter W. Martish, Jr.			CHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name James J. Noon			
Street Address 50 Industrial Circle			Street Address 50 Industrial Circle			
City: Lincoln	State RI	хір 02865	Сіў Lincoln	State RI	λφ 02865	
Secretary Name James J. Noon			Treasurer Name Walter W. Martish, Jr.			
Street Address 50 Industrial Circle			Street Address 50 Industrial Circle			
City Lincoln	State RI	^{Zip} 02865	City Li ncol n	State RI	^{χφ} 02865	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name Walter W. Martish, Jr.			ACHMENT) TELL IN SPACES BEFORE USING ATTACHMENTS Director Name James J. Noon			
Street Address 50 Industrial Circle			Street Address 50 Industrial Circle			
City Lincoln	State RI	<i>Zip</i> 02865	<i>Cuy</i> Lin coln	State RI	<i>Zip</i> 02865	
Director Name			Director Name			
Street Address			Street Address			
CHY	State	Zip	City	State	27	
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 State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Vilne	
			250	Common	Nortear	
This report must be executed this report must be executed o				ation is in the hands of a	receiver or trustee,	

File Date FILED	
Check No. JAN 28 2009	
By 31539	
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affi including any accompanying schedules and	
contained herein are true and correct.	1 /aslow
Signdture	Date
James J. Noon	
Print or Type Name	——————————————————————————————————————
Vice President	
Title	