



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

# AMENDED

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.

1. Corporate ID No. 144616		2. Name of Corporation Huestis Machine Corporation			
3. Street Address Principal Business Office 68 Buttonwood Street			City Bristol	State RI	Zip 02809
4. Business Phone No. 401-253-5500		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Developing, manufacturing & marketing custom & proprietary machinery and equip. Wire and cable machinery and equip. and medical equip.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Krishnan Suthanthiran			Vice President Name		
Street Address 6718 Springfield Drive			Street Address		
City Lorton	State VA	Zip 22079	City	State	Zip
Secretary Name Ruth S. Bergin			Treasurer Name		
Street Address 7643 Fullerton Road			Street Address		
City Springfield	State VA	Zip 22153	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Krishnan Suthanthiran			Director Name		
Street Address 6718 Springfield Drive			Street Address		
City Lorton	State VA	Zip 22079	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200,000	\$0.01 PAR VALUE		133,607	Common	\$0.01

FEB 25 10:53 AM '09  
 CORPORATIONS DIVISION

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.

**FILED**  
FEB 25 2009

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.

Signature: Ruth Bergin Date: 2/23/09  
Print or Type Name: Secretary  
Title: Secretary

File Date: \_\_\_\_\_ BY: AMF  
Check No.: \_\_\_\_\_ 10:53  
By: \_\_\_\_\_  
FOR SECRETARY OF STATE USE ONLY



# State of Rhode Island and Providence Plantations

**A. Ralph Mollis**

*Secretary of State*

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly  
executed in accordance with the provisions of Title 7 of the General Laws  
of Rhode Island, as amended, has been filed in this office on this day:

A handwritten signature in black ink that reads "A. Ralph Mollis".

A. RALPH MOLLIS

*Secretary of State*

