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

A. Ralph Mollis, *Secretary of Stat*
Corporations Divisio
148 W. River Stree
Providence, RI 02904-261
401.222.304

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(cerd)) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation
57156	General Supply & Metals, Inc.

3. Street Address Principal Business Office	City	State	Zip
47 Nauset St.	New Bedford	MA	02746

4. Business Phone No.	5. State of Incorporation
(508) 999-6257	Massachusetts

6. Brief Description of the Character of Business Conducted in Rhode Island

wholesale distributor of supplies

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
John Patys	47 Nauset St.	New Bedford	MA	02746

Vice President Name	Street Address	City	State	Zip
None				

Secretary Name	Street Address	City	State	Zip
John Patys	47 Nauset St.	New Bedford	MA	02746

Treasurer Name	Street Address	City	State	Zip
John Patys	47 Nauset St.	New Bedford	MA	02746

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
John Patys	47 Nauset St.	New Bedford	MA	02746

Director Name	Street Address	City	State	Zip
None				

Director Name	Street Address	City	State	Zip
None				

9. SHARES AUTHORIZED

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.

1,000 Common No Par

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
500	Common	No Par

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.

[redacted] [redacted]

Under penalty of perjury, I declare and affirm that I have examined this repor including any accompanying schedules and statements, and that all statemen contained herein are true and correct.

Signature 2-24-09 Date

John Patys
Print or Type Name

[redacted] President
Title

File Date 2-25-09
Check No. 510715
By: MNC

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