



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

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

* 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. 103614		2. Name of Corporation DURA-KOTE TECHNOLOGY, LTD.			
3. Street Address Principal Business Office 2 INDUSTRIAL LANE			City JOHNSTON	State RI	Zip 02919
4. Business Phone No. 4017512520		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island GENERAL BUSINESS OF PLATING, COATING, ENAMELING AND APPLYING ANY AND ALL OTHER COATS OF COVERING ON JEWELRY, METALS AND ALL KINDS OF PRODUCTS.					
7. NAMES AND ADDRESSES OF THE OFFICERS (X BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Louis Francazio			Vice President Name Robert Ricci		
Street Address 120 Gasboard Street			Street Address 87 Woodsong Drive		
City Jamestown	State RI	Zip 02835	City North Scituate	State RI	Zip 02857
Secretary Name Louis Francazio			Treasurer Name Robert Ricci		
Street Address 120 Gasboard Street			Street Address 87 Woodsong Drive		
City Jamestown	State RI	Zip 02835	City North Scituate	State RI	Zip 02857
8. NAMES AND ADDRESSES OF THE DIRECTORS (X BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Louis Francazio			Director Name Robert Ricci		
Street Address 1158 Chopmist Hill Road			Street Address 87 Woodsong Drive		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED (X BOX FOR ATTACHMENT) ☐ 10. SHARES ISSUED (X BOX FOR ATTACHMENT) ☐					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 COMMON	NO PAR VALUE		200	Common	No Par Value

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.



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FILED

File Date
MAR 02 2009
Check No.
By 5694
FOR SECRETARY OF STATE USE ONLY

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: Louis Francazio Date: 02/26/2009
Print or Type Name: LOUIS FRANCAZIO
Title: PRESIDENT