



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

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 150068		2. Name of Corporation Toryx Technologies INC			
3. Street Address Principal Business Office 43 Petal Lane			City Wakefield	State RI	Zip 02879
4. Business Phone No. (401) 284-2248		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Hiram Barber (President)			Vice President Name John Cullinane (Vice President)		
Street Address 43 Petal Lane			Street Address 7 Fairside Drive		
City Wakefield	State RI	Zip 02879	City Richmond	State RI	Zip 02812
Secretary Name Craig Barber (Secretary)			Treasurer Name Brian Barber (Treasurer)		
Street Address 42 Harbor View Lane			Street Address 34 Potter Hill Rd		
City Norwich	State CT	Zip 06360	City Grafton	State MA	Zip 01519
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 1000	Class/Series Common	Par Value \$ 10.00

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.

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.

File Date **FILED M**
MAY 06 2009
Check No. **088769**
By: **Brian Barber**
FOR SECRETARY OF STATE USE ONLY

11:50 AM 05:11 PM 9-17-08
Signature **Brian Barber**
Date **April 27, 2009**
Print or Type Name **BRIAN BARBER**
TREASURER