

A. Ralph Mollis, Secretary of State Corporations Division -148 W. River Street Providence. Rt 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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. 6482	2 Name of Cor Deery Too	2 Name of Corporation Deery Tool & Engineering, Inc.				
3. Street Address Principal Business Office 1654 Main Street			City West Warwick	State RI	7ip 02893	
4 Business Phone No 5. State of Incorporation Rhode Island						
6. Brief Description of the Char Machine Tools 7. NAMES AND ADDRE. President Name Richard A. Deery		icted in Rhode Island ICERS: ("X" BOX FOR ATTA	CHMENT) FILL IN S Vice President Name Doris M. Deery	PACES BEFORE USING	G ATTACHMENTS	
Street Address 1654 Main Street			Street Address 127 Pembroke Lane			
City West Warwick	State RI	^{Zip} 0289 3	City Coventry	State RI	Zip 02816	
Secretary Name Richard A. Deery			Treasurer Name Doris M. Deery			
Street Address 1654 Main Street			Street Address 127 Pembroke Lane			
West Warwick	State RI	^{Zip} 02 893	City Coventry	State RI	^{Zip} 02816	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name Richard A. Deery Street Address			**TACHMENT** FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Doris M. Deery Street Address			
1654 Main Street City State Zith			127 Pembroke Lane			
West Warwick Director Name	RI	02893	City Coventry Director Name	RI RI	02 6 02	
Street Address			Street Address 27			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZE	D .			("X" BOX FOR ATTAC TION <u>MUST</u> BE COMPLETED	HMENTES CAR	
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	Value (*)	
			100	Common	No Par	
This report must be executhis report must be executhis	uted on behalf of the	ne corporation by an authorize e corporation by the receiver of	I d representative. If the contrustee.	orporation is in the hand	ls of a receiver or trustee.	
		FILTOM	1 mongaming any accent	npanying schedules and st	that I have examined this report	
File Date		OCT 2 7 2009	contained herein an	e true and correct.	4	
Check No.			Signature Richard A. D	eery	Date	
FOR SECRETARY OF STATE USE ONLY			Print or Type Name President			
rok secretary 0	r STATE USE ONLY		Title		Form 630 Rev. 08/08	