

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 20/0

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. 6246/ Netcoh Sales Co. Inc. 3. Street Address Principal Business Office 130/ Jefferson Blvd. City Warwick RI 02886							
3. Street Address Principal Business Office 1301 Jefferson Blvd. 4. Business Phone No. 5. State of Incorporation			Cuy Wood	K	State R	エ	02886
	D-						
401-739-9008 6. Brief Description of the Character of Business Conducted in Rhode Island							
Sales - Fasteners + Adhesives							
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)							
Sam Netcoh			Carol Netcoh				
Street Address 30 Fashion Dr			Street Address 30 Fashion DC City Warwick RT 2ip 02886				
city Warwick Ste	R I	02886	city 11) ac w Ck		State R T		02886
Secretary Name		L	Treasurer Name				L
Carol Netcoh Street Address			Sam Netcoh Streel Address				
Street Address 30 Fashion DC City Warwick RI 02886			Street Address 30 Fashion DC Cuy Warwick RI Zip 02886				
Warwick St	ate RI	02886	Warwick		State -	工	Zip 02886
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name							
(Mector Name							
Street Address			Street Address				
City	rate V	Zip	City		State		Zip
Director Name			Director Name				
Street Address			Street Address				
City St	tate	Zip	City		State		Zip
9. SHARES AUTHORIZED	:						
1,000 COMM NO PAR VALUE			ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Class/Series Par Value				
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/serie	<u></u>	Tar vame
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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 repo- including any accompanying schedules and statements, and that all statemen							
contained herein are true and correct / 1-5-/0							
File Date / CO 2010							Date
Check No. 23/4/ Sam A. Netcoh)
By: Print or Type Name							•
FOR SECRETARY OF STATE USE ONLY Title							
Form 630 Rev. 08/08							