

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 2010

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 there (30) days after the time percepted by June (B.I.G.L. 7-1.2-1501).

| 1. Corporate ID No. 58044 | 2. Name of Co Polyureth | 2. Name of Corporation Polyurethane Molding Industries, Inc. | | | | |
|--|----------------------------|--|---|--|--|--|
| 3. Street Address Principal Business Office 100 Founders Drive | | | Ciry: Woonsoket | State Rhode Island | Ζίρ 02895 | |
| i. Business Phone No. 5. State of Incorporation Rhode Island | | | | • | | |
| Brief Description of the Ci | | | | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name William F. Ober | | | ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name None | | | |
| reet Address 00 Founders Drive | 9 | The state of the s | Street Address | | * | |
| Woonsocket | State RI | ^{Ζψ} 02895 | City | State | Zip | |
| Secretary Name Susan M. Ober | | | Treasurer Name William F. Ober | | | |
| Street Address 100 Founders Drive | | | Street Address 100 Founders Drive | | | |
| Voonsocket | RI | ^{Ζιρ} 02895 | City Woonsocket | State RI | 71p 02895 | |
| irector Name Ione | ESSES OF THE DIR | ECTORS: ("X" BOX FOR AT | TACHMENT) THE IN Director Name | N SPACES BEFORE USING | ATTACHMENTS | |
| Street Address | | | Street Address | | | |
| ity | State | Zip | City | State | Zip | |
| director Name | | | Director Name | | | |
| Street Address | | | Street Address | | | |
| ity | State | Zip | City | State | Zip | |
| SHARES AUTHORIZ | ZED | • | 10. SHARES ISSUED ISSUED SHARES — THIS SEE | I <i>("X" BOX FOR ATTACHM</i> CTION <u>MUST</u> BE COMPLETED | (ENT) | |
| 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 | Par Value | |
| | | | 5,420 | common | \$1.00 par valu | |
| | | | | | | |
| his report must be exa | cuted on behalf of t | he corporation by an authorize | J | | ······································ | |

| File Date | FILED | | |
|-----------|----------------------------|--|--|
| Check No | JAN 22 2010 | | |
| Ву: | By 28208 | | |
| FOR S | ECRETARY OF STATE USE ONLY | | |

| including any accompanying sche | e and affirm that I have examined this report, edules and statements, and that all statements |
|---|---|
| contained herein are true and corr | 1/4/2010 |
| Signature | Bate |
| William F. Ober | |
| Print or Type Name | |
| President | |
| Title | |