



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

A. Ralph Mollis, Secretary of State
Corporations Division
145 W. River Street
Providence, RI 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(c), 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)(1)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 53151		2. Name of Corporation TWH Co. Inc.		
3. Street Address Principal Business Office 86 Vermont Ave.		City Warrwick	State RI	Zip 02888
4. Business Phone No. 401 738 4627		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Rubber Mold Casting and Manufacturing				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Anthony C. Lapati		Vice President Name		
Street Address 304 Old Snake Hill Rd.		Street Address		
City Chepachet	State RI	Zip 02814	City	State
Secretary Name		Treasurer Name		
Street Address		Street Address		
City	State	Zip	City	State
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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 300	Class Series Comm	Par Value 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.

FILED	
File Date	JAN 26 2010
Check No.	By 4606
By:	
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedule and statements, and that all statements contained herein are true and correct.

Signature: Anthony C. Lapati Date: 1/23/10
Print or Type Name: President
Title: President