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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 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 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. | 2. Name of Corporation | | |
|---|---|---|---|
| 487691 | Reade International Corp. | | |
| 3. Street Address Principal Business Office | City | State | Zip |
| 850 Waterman Avenue | East Providence | RI | 02915 |
| 4. Business Phone No. | 5. State of Incorporation | | |
| (401) 433-7000 | Rhode Island | | |

6. Brief Description of the Character of Business Conducted in Rhode Island
Distributor of advanced metal, ceramic and intermetalliccompositions for high technology and governmental applications.

**7. NAMES AND ADDRESSES OF THE OFFICERS:** *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

| President Name | Vice President Name |
|---|---|
| Charles F. Reade, Jr. | Emily A. S. Reade |
| Street Address: 850 Waterman Avenue | Street Address: 850 Waterman Avenue |
| City: East Providence; State: RI; Zip: 02915 | City: East Providence; State: RI; Zip: 02915 |
| Secretary Name: Charles F. Reade, Jr. | Treasurer Name: Charles F. Reade, Jr. |
| Street Address: 850 Waterman Avenue | Street Address: 850 Waterman Avenue |
| City: East Providence; State: RI; Zip: 02915 | City: East Providence; State: RI; Zip: 02915 |

**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; Zip |
| Director Name | Director Name |
| Street Address | Street Address |
| City; State; Zip | City; State; Zip |

**9. SHARES AUTHORIZED:** *("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.

**10. SHARES ISSUED:** *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES – THIS SECTION MUST BE COMPLETED

| Number of Shares | Class/Series | Par Value |
|---|---|---|
| 100 Shares | Common Stock | at $.01 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.

[redacted] [redacted]

**FILED**

File Date: MAR 23 2010
Check No.:
By: BY 21419

FOR SECRETARY OF STATE USE ONLY
45326-10-498431

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.

C. F. Reade Jr. 1 MAR 10
*Signature* *Date*

Charles F. Reade, Jr.
*Print or Type Name*

President
*Title*

[redacted]

Form 630 Rev. 12/06