

FOR SECRETARY OF STATE USE ONLY

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 2011 4 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 Jerry (R.I.G.L. 7-1.2-1501).

7 " F-11117 July 19 225:00:		portuon jailing or rejusing to file its an	nauc report within thirty (30) aays aft	er the time prescribed by i	law (R.I.G.L. 7-1.2-1501(v&d)) is
1. Corporate ID No. 26070	2. Name of Co. JONES S	operation AFETY EQUIPMENT CON	MPANY .		
3. Street Address Principal Business Office 325 MASSASOIT AVE			EAST PROVIDENCE	State R.I.	Zip 02914
4. Business Phone No. 401-434-4010		5. State of Incorporation RHODE ISLAND	77 02514		
6. Brief Description of the Charact SAFETY GOGGLES FOR	er of Business Cond R INDUSTRY A	ncted in Rhode Island			
		FICERS: ("X" BOX FOR ATTA	ICHMENT) FILL IN SPACE Vice President Name BRUCE B. HEY	CES BEFORE USING	ATTACHMENTS
Street Address 125 CATLIN AVE.			Street Address 325 MASSASOIT AVE.		
EAST PROVIDENCE	State R.I.	^{Zip} 02916	EAST PROVIDENCE	State R.I.	^{Zip} 02914
Secretary Name LAWRENCE K. HEY			Treasurer Name JUDITH P. HEY		
Street Address 125 CATLIN AVE.			Street Address 259 BONNET PT. ROAD		
EAST PROVIDENCE	R.I.	^{Zip} 02916	City NARRAGANSETT	State R.I.	Ζφ 02882
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR AT Director Name LAWRENCE K, HEY			TACHMENT) THE FILL IN SPACES BEFORE USING ATTACHMENTS Director Name BRUCE B. HEY		
Street Address 125 CATLIN AVE.			Street Address 325 MASSSASOIT AVE		
EAST PROVIDENCE Director Name	R.I.	21p 02916	EAST PROVIDENCE Director Name	State R.I.	Ζψ 02914
Street Address			Street Address		
City	State	Zip	Сиу	State	Ζip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
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
			1,000.	Common/	without par value
This report must be execute	d on half 16 Ca				
this report must be executed	on behalf of th	ne corporation by an authorize e corporation by the receiver of	d representative. If the corpor or trustee.	ation is in the hand	s of a receiver or trustee,
			Hadana a tra		
File Date FILED			including any accompan	ying schedules and sta	hat I have examined this reportements, and that all statement
Check No. JAN 0 4 2011 By BY			Signature LAWRENCE K. HEY Print or Type Name PRESIDENT		

Title