



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 2011

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. 106978		2. Name of Corporation EXCEL TIRE GAUGE, INC.			
3. Street Address Principal Business Office 11 KNIGHT STREET, BUILDING E20			City WARWICK	State RI	Zip 02886
4. Business Phone No. 4017328420		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island IMPORTATION, DISTRIBUTION, MARKETING AND EXPORTATION OF PRECIOUS TIRE GAUGES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JOHN R. NELSON			Vice President Name LUIZ RICCARDO BRITTO		
Street Address 604 PONTIAC AVENUE			Street Address 80 RUTLAND AVENUE		
City CRANSTON	State RI	Zip 02910	City CRANSTON	State RI	Zip 02920
Secretary Name JOHN R. NELSON			Treasurer Name LUIZ RICCARDO BRITTO		
Street Address 604 PONTIAC AVENUE			Street Address 80 RUTLAND AVENUE		
City CRANSTON	State RI	Zip 02910	City CRANSTON	State RI	Zip 02920
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name JOHN R. NELSON			Director Name LUIZ RICCARDO BRITTO		
Street Address 604 PONTIAC AVENUE			Street Address 80 RUTLAND AVENUE		
City CRANSTON	State RI	Zip 02910	City CRANSTON	State RI	Zip 02920
Director Name LUIZ RICCARDO BRITTO			Director Name		
Street Address 80 RUTLAND AVENUE			Street Address		
City CRANSTON	State RI	Zip 02920	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	NO PAR VALUE		1000	common	none

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 20 2011

Check No. By [Signature]

By: 2514

FOR SECRETARY OF STATE USE ONLY

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.

[Signature] 1/4/11
Signature Date
JOHN R. NELSON
Print or Type Name
PRESIDENT
Title