RI SOS Filing Number: 201175831950 Date: 02/25/2011 4:00 PM

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.	2. Name of Corporation
93677	Diversified Repair Services, Inc

3. Street Address Principal Business Office	City	State	Zip
503 Hoppin Hill Avenue	North Attleboro	MA	02760

4. Business Phone No.	5. State of Incorporation
508-643-2233	Rhode Island

6. Brief Description of the Character of Business Conducted in Rhode Island
to repair and service air powered instruments and tools

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

President Name	Street Address	City	State	Zip
Michael F. Marchitto Jr.	503 Hoppin Hill Avenue	North Attleboro	MA	02760

Vice President Name	Street Address	City	State	Zip
none				

Secretary Name	Street Address	City	State	Zip
Joan Marchitto	503 Hoppin Hill Avenue	North Attleboro	MA	02760

Treasurer Name	Street Address	City	State	Zip
Joan Marchitto	503 Hoppin Hill Ave	North Attleboro	MA	02760

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

Director Name	Street Address	City	State	Zip
Michael F. Marchitto Jr.	503 Hoppin Hill Avenue	North Attleboro	MA	02760

Director Name	Street Address	City	State	Zip
Joan Marchitto	503 Hoppin Hill Avenue	North Attleboro	MA	02760

Director Name	Street Address	City	State	Zip
none				

Director Name	Street Address	City	State	Zip
none				

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SECRETARY OF STATE
CORPORATIONS DIVISION

9. SHARES AUTHORIZED

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
1000		.01

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]

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 *Date* 2/24/11

Michael F. Marchitto Jr.
Print or Type Name

President
Title

File Date	FILED
Check No.	FEB 25 2011
By:	By 138395

FOR SECRETARY OF STATE USE ONLY

[redacted]

Form 630 Rev. 08/08

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