



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 2012**

**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.<br>114691  |             | 2. Name of Corporation<br>ASSAY ONE INCORPORATED                    |                        |                     |
| 3. Street Address Principal Business Office<br>105 DEXTER RD   |             | City<br>EAST PROVIDENCE   | State<br>RI            | Zip<br>02914        |
| 4. Business Phone No.<br>401-434-3337  |             | 5. State of Incorporation<br>RHODE ISLAND                           |                        |                     |
| 6. Brief Description of the Character of Business Conducted in Rhode Island  |             |   |                        |                     |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |             |   |                        |                     |
| President Name<br>EDMUND E. BRENNAN  |             | Vice President Name<br>EDMUND E. BRENNAN                            |                        |                     |
| Street Address<br>82 PRESIDENT AVE   |             | Street Address<br>82 PRESIDENT AVE                                  |                        |                     |
| City<br>RIVERSIDE  | State<br>RI | Zip<br>02915  | City<br>RIVERSIDE      | State<br>RI         |
| Secretary Name<br>EDMUND E. BRENNAN  |             | Treasurer Name<br>EDMUND E. BRENNAN                                 |                        |                     |
| Street Address<br>82 PRESIDENT AVE   |             | Street Address<br>82 PRESIDENT AVE                                  |                        |                     |
| City<br>RIVERSIDE  | State<br>RI | Zip<br>02915  | City<br>RIVERSIDE      | State<br>RI         |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |             |   |                        |                     |
| Director Name<br>EDMUND E. BRENNAN   |             | Director Name   |                        |                     |
| Street Address<br>82 PRESIDENT AVE   |             | Street Address  |                        |                     |
| City<br>RIVERSIDE  | State<br>RI | Zip<br>02915  | 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) <input type="checkbox"/> |                        |                     |
| 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 <b>MUST</b> BE COMPLETED               |                        |                     |
|  |             | Number of Shares<br>100   | Class/Series<br>COMMON | Par Value<br>NO PAR |

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 **MAR 01 2012**

Check No. \_\_\_\_\_

By: [Signature]

By: 3211

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] 2/28/11  
Signature Date  
EDMUND E. BRENNAN  
Print or Type Name  
PRESIDENT  
Title