



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 67782		2. Exact name of the Corporation OCEAN STATE METALS, INC.			
3. Principal office address 80 Delaine Street			City Providence	State RI	Zip 02909
4. Business Phone No. 401-454-4924		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Purchase and sale of wholesale and retail scrap, metals, gold, silver					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Michael Eides			Vice-President Name Michael Eides		
Street Address 80 Delaine Street			Street Address 80 Delaine Street		
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
Secretary Name Michael Eides			Treasurer Name Michael Eides		
Street Address 80 Delaine Street			Street Address 80 Delaine Street		
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Michael Eides			Director Name		
Street Address 80 Delaine Street			Street Address		
City Providence	State RI	Zip 02909	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			1000	common	no 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.

File Date _____

Check No _____

By: _____

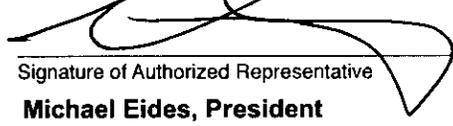
FOR SECRETARY OF STATE USE ONLY

FILED

MAR 15 2012

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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 of Authorized Representative  Date **3/6/12**

Print or Type Name of Authorized Representative
Michael Eides, President