



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>88038   |             | 2. Name of Corporation<br>Foldex Corporation |   |                      |              |
| 3. Street Address Principal Business Office<br>5 Division Street, Box 2  |             |  | City<br>East Greenwich  | State<br>RI          | Zip<br>02818 |
| 4. Business Phone No.<br>401-866-5557  |             | 5. State of Incorporation<br>Rhode Island    |   |                      |              |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br>To Create, Manufacture and Distribute Certain Folders                       |             |  |   |                      |              |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |             |  |   |                      |              |
| President Name<br>Leif Reslow  |             |  | Vice President Name   |                      |              |
| Street Address<br>20 Old Greenwich Drive   |             |  | Street Address  |                      |              |
| City<br>East Greenwich   | State<br>RI | Zip<br>02818                                 | City  | State                | Zip          |
| Secretary Name<br>Scott Reslow   |             |  | Treasurer Name<br>Leif Reslow                                       |                      |              |
| Street Address<br>20 Old Greenwich Drive   |             |  | Street Address<br>20 Old Greenwich Drive                            |                      |              |
| City<br>East Greenwich   | State<br>RI | Zip<br>02818                                 | City<br>East Greenwich  | State<br>RI          | Zip<br>02828 |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |             |  |   |                      |              |
| Director Name<br>Leif Reslow   |             |  | Director Name<br>Hugo Britschgi                                     |                      |              |
| Street Address<br>20 Old Greenwich Drive   |             |  | Street Address<br>Oberbauerstrsse 4                                 |                      |              |
| City<br>East Greenwich   | State<br>RI | Zip<br>02818                                 | City<br>Kriens  | State<br>Switzerland | Zip          |
| Director Name<br>Thomas Northup  |             |  | Director Name   |                      |              |
| Street Address<br>4080 South County Trail  |             |  | Street Address  |                      |              |
| City<br>Charlestown  | State<br>RI | Zip<br>02813                                 | 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. |             |  | ISSUED SHARES — THIS SECTION MUST BE COMPLETED                      |                      |              |
|  |             |  | Number of Shares  | Class/Series         | Par Value    |
|  |             |  | 5,000   | Common               | \$ 0.01      |

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.

**FILED**

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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

Date

Leif Reslow

Print or Type Name

President

Title

File Date \_\_\_\_\_  
Check No. \_\_\_\_\_  
By \_\_\_\_\_  
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