

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 period must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 12667		2. Name of Corporation Cranston Welding Supply Co.			
3. Principal office address 1425 Park Avenue			City Cranston	State RI	Zip 02920
4. Business Phone No. 401-942-4411			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island Sales and Service of Welding Supplies					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name William T. Heaton			Vice-President Name Michael A. Kearney		
Street Address 1425 Park Avenue			Street Address 1425 Park Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name William T. Heaton			Treasurer Name Michael A. Kearney		
Street Address 1425 Park Avenue			Street Address 1425 Park Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name William T. Heaton			Director Name Michael A. Kearney		
Street Address 1425 Park Avenue			Street Address 1425 Park Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
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
			200	Common	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.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

DEC 21 2012

BY

W 186006

11:06

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 Person

Date

William T. Heaton

Print or Type Name of Authorized Person