

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

2013

Filing Period: January	1 - March 1 • T	his report must be to	uned or printed lead	hly	
riing ree: \$50.00 • FA	VILURE TO FIL	E THIS REPORT BY	MARCH 31 WILL RE	SULT IN A \$25 AA DE	NALTY CEE
1. Entity ID No.	2. Exact nam	e of the Corporation		10021 III A \$23.00 FZ	MALIT FEE.
18515	\ \\ \\	THAM	FAIGH	SKFRINIC	121/
3. Primolipal office address	1 0x168	DUN PO	City VQ VIII	State	7 7270
4. Business Phone No. 9	8500)	5. State of Incorpora		02019
6. Brief description of the chara	cer of business	conducted in Rhode Islan	nd C		
PACILITIES &	MAKIN	EENGINE	BRIG		
7. LIST ALL OFFICERS (NAM President Name /	ES AND ADDRE	SSES) ("X" BOX FOR A		1	
Street Address	C W	ITHAM	Vice-Presiden) Nam	60 WITH	1111
City / - 14	- TUKE	ERWIN	Street Address		
Secretary Name	State KI	02877	City	State	Zip
Street Address	WA WI	THAWI	Treasurer Name		
City 94/5-14	- TUKE	PRECH!	Street Address		
	State	Zip	City	State	Zip
8. LIST ALL DIRECTORS (Nati	MES AND ADDR	ESSES) ("X" BOX FOR	ATTACHMENT)		
\ \ \/	4.		Director Name		
Street Address			Street Address		
			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address					
Sireel Address			Street Address		
City	State	Zip	City		
		Ζ.ΙΡ	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			202		100
See Section 9 of Instruction sh	eet.				
This report must be executed or	n behalf of the cor	poration by an authorize	d representative. If the	Corporation is in the hear	la of a service of the service of th
	this report must b	e executed on behalf of	ure corporation py the n	eceiver or trustee.	
File Date 1/6//3			Under penalty of pe	eriury. Ldeclare and affi	rm that I have examined
Check No 3	1	FILED	ring rehibit weindit	ng any accompanying sense contained herein a	Chedules and statements
By: Och	and	JAN 0 8 2013	Signature of Authori		Øate/
FOR SECRETARY OF STATE	USE ONLY	acin 0 0 7012	1 A)C/(V. VIITHA	W 46/13
orm No. 630 evised: 01/2012	BY	mne	CHIR OF TyperName	of Authorized Represent	ative //
	Chi	# 2131	-		/