



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 • 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. <b>2726</b>		2. Exact name of the Corporation <b>BRADA MANUFACTURING, INC.</b>			
3. Principal office address <b>46 Industrial Drive, Unit B</b>			City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
4. Business Phone No. <b>401-739-3774</b>			5. State of Incorporation <b>Rhode Island</b>		
6. Brief description of the character of business conducted in Rhode Island <b>Manufacturer screw machine products</b>					
President Name <b>W. Bruce Hamilton</b>			Vice-President Name <b>Michael W. Hamilton</b>		
Street Address <b>2785 Spruce Creek Boulevard</b>			Street Address <b>20 Chelsea Farm Drive</b>		
City <b>Daytona Beach</b>	State <b>FL</b>	Zip <b>32124</b>	City <b>Richmond</b>	State <b>RI</b>	Zip <b>02898</b>
Secretary Name <b>W. Bruce Hamilton</b>			Treasurer Name <b>W. Bruce Hamilton</b>		
Street Address <b>2785 Spruce Creek Boulevard</b>			Street Address <b>2785 Spruce Creek Boulevard</b>		
City <b>Daytona Beach</b>	State <b>FL</b>	Zip <b>32124</b>	City <b>Daytona Beach</b>	State <b>FL</b>	Zip <b>32124</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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
			100	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.

**FILED**

**FEB 05 2013**

**4305**

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]*  
 Signature of Authorized Representative

**1-24-13**  
 Date

**Michael W. Hamilton - Vice President**

Print or Type Name of Authorized Representative