



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 2013

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. 51662		2. Name of Corporation FIREX, INC.	
3. Street Address Principal Business Office 1650 West Main Road		City Portsmouth	State RI
		Zip 02871	
4. Business Phone No. 683-5200		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island to sell, lease, service and repair firefighting apparatus and equipment			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Janice M. McLaughlin		Vice President Name Janice M. McLaughlin	
Street Address 74 Morning Dove Drive		Street Address 74 Morning Dove Drive	
City Tiverton	State RI	City Tiverton	State RI
Zip 02878		Zip 02878	
Secretary Name Janice M. McLaughlin		Treasurer Name Janice M. McLaughlin	
Street Address 74 Morning Dove Drive		Street Address 74 Morning Dove Drive	
City Tiverton	State RI	City Tiverton	State RI
Zip 02878		Zip 02878	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name None		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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	
	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 14 2013

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

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]* Date: **1-22-13**
Print or Type Name: **Janice M. McLaughlin**
Title: **President**