



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

2013

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR**

**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. 93760		2. Name of Corporation MACHINE DIAGNOSTICS, INC.			
3. Street Address Principal Business Office 393 Plain Road, West Greenwich, RI 02817			City	State	Zip
4. Business Phone No. (401) 738-4981		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Electronic machinery repairs and sales					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Cameron M. Hubbard			Vice President Name Cameron M. Hubbard		
Street Address 393 Plain Road			Street Address 393 Plain Road		
City West Greenwich, RI 02817	State	Zip	City West Greenwich, RI 02817	State	Zip
Secretary Name Mary T. Hubbard			Treasurer Name Cameron M. Hubbard		
Street Address 393 Plain Road			Street Address 393 Plain Road		
City West Greenwich, RI 02817	State	Zip	City West Greenwich, RI 02817	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Cameron M. Hubbard			Director Name		
Street Address 393 Plain Road			Street Address		
City West Greenwich, RI 02817	State	Zip	City	State	Zip
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100	Common	No Par Value

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**

**MAR 01 2013**

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.

1/16/2013

Signature Cameron M. Hubbard

Date

Print or Type Name

President

Title

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