



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. 157725		2. Exact name of the Corporation D&SW Enterprises Inc	
3. Principal office address 99 Bayview Avenue		City Warwick	State RI
		Zip 02818	
4. Eusiness Phone No. 401-640-0191		5. State of Incorporation Virginia	
6. Brief description of the character of business conducted in Rhode Island Sales of Snap On Tools			
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name Dennis Werner		Vice-President Name	
Street Address 99 Bayview Avenue		Street Address	
City Warwick	State RI	City	State
Zip 02818		Zip	
Secretary Name		Treasurer Name Dennis Werner	
Street Address		Street Address 99 Bayview Avenue	
City	State	City Warwick	State RI
Zip 02818		Zip 02818	
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name Dennis Werner		Director Name	
Street Address 99 Bayview Avenue		Street Address	
City Warwick	State RI	City	State
Zip 02818		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.			
NUMBER OF SHARES 1,000		CLASS/SERIES	PAR VALUE 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 _____

FILED

Check No _____

JUN 27 2013

By: _____

FOR SECRETARY OF STATE USE ONLY BY **2934**

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.

Robert Cohn Pres **6/19/13**
 Signature of Authorized Representative Date

Robert Cohn Pres Bob's Fin. Serv. Inc
 Print or Type Name of Authorized Representative