

3. Street Address Principal Business Office 145 Dean Knauss Drive

4. Business Phone No. 401-789-8700

2. Name of Corporation Eartec Company

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

Zip

02882

State RI

2014

5. State of Incorporation Rhode Island

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

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. 84036

City Narragansett

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES REFORE USING ATTACHMENTS Proceedings Name Paul A. Hooper Storet Address State Paul A. Hooper Open State Open Open Open	6. Brief Description of the Character Manufacture and distribu	cter of Business Conduction of Communic	cted in Rhode Island cations Systems			
John N. Hooper Jr. Street Address	The same transfer of the same	SES OF THE OFFI	CERS: ("X" BOX FOR ATTA		SPACES BEFORE USING	ATTACHMENTS
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Treasurer Name Paul A. Hooper Paul				: *		_
145 Dean Knauss Drive 145				; Treasurer Name		
Narragansett RI 02882 Narragansett RI 02882 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Director Name				i .		
Director Name Director Name Street Address			^{Zip} 02882			
Street Address Street Address Street Address Street Address	8. NAMES AND ADDRESS	SES OF THE DIRE	CTORS: ("X" BOX FOR ATT	ACHMENT) [FILL IN	SPACES BEFORE USIN	G ATTACHMENTS
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Director Name Director Name	Street Address			Street Address		
Street Address State State Zip 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Class/Series Par Value 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. MAR 0 4 2014 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 is in the hands of a receiver or trustee. MAR 0 4 2014 Under penalty of perjury, I declare and affirm that I have examined this repince of the properties of the secretary of trustee. Signature Paul A. Hooper Print or Type Name Secretary/Treasurer Title	City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 2000 Common no Par Value 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. MAR 0 4 2014 Where of Shares is Sued SHARES — THIS SECTION MILET BE COMPLETED Number of Shares Class/Series Par Value 200 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 in the previous description of the previous description any accompanying schedules and statements, and that all statements are true and correct. File Date Check No. By: FOR SECRETARY OF STATE USE ONLY Title State Source State USE ONLY Number of Shares Class/Series Par Value Class/Series Par Value Class/Series Par Value Under penalty of perjury, I declare and affirm that I have examined this repingenting any accompanying schedules and statements, and that all statements are true and correct. Signature Paul A. Hooper Print or Type Name Secretary/Treasurer Title	Director Name			Director Name		
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