

1. Entity ID No.

52950

## 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

Filing Period: January 1 - March 1 · This report must be typed or printed legibly.

2. Exact name of the Corporation C&S Machine Co., Inc.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

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Principal office address     S Pawtucket Avenue Bldg 1A			City East Providence	e RI	Zip <b>02916</b>	
4. Business Phone No. 401-431-1830			5. State of Incorporation RI			
6. Brief description of the ch Manufacturer of scre			d			
			ารัสสราชานทั้ง <u>โดย โ</u>		\$140 LV2	
President Name Brian J. Crevier			Vice-President Name Brian J. Crevier			
Street Address 62 Thurston Street			Street Address 62 Thurston Street			
City <b>Riverside</b>	State <b>RI</b>	Zip <b>02915</b>	City Riverside	State <b>RI</b>	Zip <b>02915</b>	
Secretary Name Brian J. Crevier			Treasurer Name Brian J. Crevier			
Street Address 62 Thurston Street			Street Address 62 Thurston Street			
City <b>Riverside</b>	State <b>RI</b>	Zip <b>02915</b>	City Riverside	State <b>RI</b>	Zip <b>02915</b>	
	\$154 (1545); \$210\$ ; \$2).	ोसन्दर्भ का समिति हो <b>।</b> इसन्दर्भ के समिति हो स्टब्स्टर हो	Anachuenni Lak			
Director Name Brian J. Crevier			Director Name			
Street Address 62 Thurston Street			Street Address			
City <b>Riverside</b>	State RI	Zip <b>02915</b>	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
granding and special straight			รู้ในกระบบกาลสาเรเลยเล่	7/5/48: (at 8 %): 5 % a / 6 %		
			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 filling.		100	Common	No Par		
See Section 9 of Instruction	n sneet.				•	
This report must be execute		corporation by an authorize			s of a receiver or trustee,	

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JUN 13 2014

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 of Authorized Representative

06/11/2014 Date

Brian J. Crevier

Print or Type Name of Authorized Representative

Form No. 630 Revised: 01/2012