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File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

1994

State of Rhode Island and Providence Plantations Office of The Secretary of State

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID:	Annual Report for the year:
Name of Business Entity:	Hi-Tech, Inc.
	Punings Entity is (about analy
Business entity organized under the laws of the State of: Rhode Island	Business Entity is (check one):
Federal Taxpayer Identification Number:	 ⅓x Business Corporation (See RIGL Chapter 7-1.1) [] Professional Service Corporation (See RIGL Chapter 7-5.1) [] Limited Liability Company (See RIGL 7-16)
For foreign entity, address and telephone number of principal office:	Name, title and mailing address of contact person to whom
Not Applicable	communications may be directed:
	David L. Reynolds, Treasurer
Phone: ()	c/o Bergman, Horowitz & Reynolds, P.C. 157 Church STreet, 19th Floor
	New Haven, CT 06510
Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):	Difference Called and
9 Sunnyside Avenue	Brief statement of the character of business conducted in Rhode Island: marketing, sales, manufacture and distribution
Johnson, RI 02919	of tool and die parts and piece parts made fro
	Date of Organization: 10/1/81 2/27/8/ mmc
Phone: (401) 331-0781	Date of Qualification to do business in Rhode Island (if foreign entity):
THE NAMES OF T CHIEF EXECUTIVE OFFICER OR PRESIDENT (Check One) STREET ALL	THE OFFICERS ARE: DORESS CITY/STATE ZIP CODE
Thomas Dolan 16 Plains Road	
☐ CHIEF OPERATING OFFICER OR ☐ VICE PRESIDENT (Check One) STREET AI	DDRESS CITY/STATE ZIP CODE
CUSTODIAN OF RECORDS OR SECRETARY (Check One) STREET AL Palm 16 Plains Road	
☐ CHIEF FINANCIAL OFFICER OR TREASURER (Check One) STREET AL	
	19th Fl., New Haven, CT 06510
NAME STREET AL	HE DIRECTORS ARE: DDRESS CITY/STATE ZIP CODE
Thomas Dolan 16 Plains Road, NAME STREET AL	DESSEX, CT 06426 CITY/STATE ZIP CODE
The state of the s	Grising Sites
NAME STREET AE	DDRESS CITY/STATE ZIP CODE
NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 5,000	NUMBER 1,000 FILED
CLASS Common Stock Only	CLASS Common. FEB 2 8 1994
SERIES N/A	SERIES N/A By 1339 mmc
PAR VALUE OR No Par Value WITHOUT PAR	PAR VALUE OR No Par Value WITHOUT PAR
Date February 22, 19 94 By:	how Delaw
Thom	as Dolan
	YPE NAME OF OFFICER SIGNING ident
	FFICER SIGNING
Form 31 1/94	
DESIGNATED REGISTERED OR RESID	ENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.