

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

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))

s subject to a penalty fee of \$25 I. Corporate ID No. 487691	2. Name of Co.	rporation International Corp.				
3. Street Address Principal Business Office 850 Waterman Avenue			City East Providence	State RI	Zip 02915	
4. Business Phone No. (401) 433-7000		5. State of Incorporation Rhode Island	Rhode Island			
NAMES AND ADDRE	ed metal, cerami	ducted in Rhode Island c and intermetalliccomposi FICERS: ("X" BOX FOR ATTA				
President Name Emily A. S. Reade			Charles F. Reade, Jr.			
Street Address 850 Waterman Avenue			Street Address 850 Waterman Avenue			
ast Providence	State RI	<sup>Ziρ</sup> <b>02915</b>	Cuy East Providence	State RI	72ip 02915	
Secretary Name Charles F. Reade, Jr.			Treasurer Name Charles F. Reade, Jr.			
Street Address 850 Waterman Avenue			Street Address 850 Waterman Avenue			
ay East Providence	State RI	Zip 02915	City East Providence	State RI	Zip 02915	
NAMES AND ADDRE	SSES OF THE DIR	ECTORS: ("X" BOX FOR AT	TACHMENT) DIFILL Director Name	IN SPACES BEFORE	USING ATTACHMENTS	
Street Address			Street Address			
ity	State	Zip	City	State	Zip	
irector Name			Director Name			
Street Address			Street Address			
ity	State	Zip	City	State	Zip	
. SHARES AUTHORIZI	ED: <i>("X" BOX FO)</i>	RATTACHMENT) 🗆	10. SHARES ISSUE	TION MUST BE COMPLETED	TACHMENT)	
This information is currently of record in the Office of the Sccretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares Class/Series Par Value  100 shares common stock of \$.01 par value			
			Too shares common stock	K OT \$.01 Pail Tailde		
nis report must be execu	uted on behalf of the	he corporation by an authorize the corporation by the received	ed representative. If the err or trustee.	corporation is in the h	ands of a receiver or truste	
		FILED	including any accomp	anying schedules and sta	nat I have examined this report itements, and that all statemen	
File Date			Curly A.S.	Keade	12/28/14 Dute	
Check No.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Emily A. S. Re	ade		
Ву:		BVA(0.8/4	Print or Type Name President			
FOR SECRETARY	OF STATE USE ONLY		Title			