



**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 2015**

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.<br><b>31941</b>   |                    | 2. Exact name of the Corporation<br><b>Providence Metallizing Company, Inc.</b> |   |                       |                     |
| 3. Principal office address<br><b>51 FAIRLAWN AVENUE</b>   |                    |   | City<br><b>PAWTUCKET</b>  | State<br><b>RI</b>    | Zip<br><b>02860</b> |
| 4. Business Phone No.<br><b>4017225300</b>   |                    |   | 5. State of Incorporation<br><b>RHODE ISLAND</b>                    |                       |                     |
| 6. Brief description of the character of business conducted in Rhode Island<br><b>VACUUM PLATING OF ALL TYPES OF MATERIAL</b>                              |                    |   |   |                       |                     |
| 7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>  |                    |   |   |                       |                     |
| President Name<br><b>RICHARD A. SUGERMAN</b>   |                    |   | Vice-President Name<br><b>CHARLES GADON</b>                         |                       |                     |
| Street Address<br><b>51 FAIRLAWN AVENUE</b>  |                    |   | Street Address<br><b>51 FAIRLAWN AVENUE</b>                         |                       |                     |
| City<br><b>PAWTUCKET</b>   | State<br><b>RI</b> | Zip<br><b>02860</b>   | City<br><b>PAWTUCKET</b>  | State<br><b>RI</b>    | Zip<br><b>02860</b> |
| Secretary Name<br><b>RICHARD A. SUGERMAN</b>   |                    |   | Treasurer Name<br><b>RICHARD A. SUGERMAN</b>                        |                       |                     |
| Street Address<br><b>51 FAIRLAWN AVENUE</b>  |                    |   | Street Address<br><b>51 FAIRLAWN AVENUE</b>                         |                       |                     |
| City<br><b>PAWTUCKET</b>   | State<br><b>RI</b> | Zip<br><b>02860</b>   | City<br><b>PAWTUCKET</b>  | State<br><b>RI</b>    | Zip<br><b>02860</b> |
| 8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>  |                    |   |   |                       |                     |
| Director Name<br><b>RICHARD A. SUGERMAN</b>  |                    |   | Director Name   |                       |                     |
| Street Address<br><b>51 FAIRLAWN AVENUE</b>  |                    |   | Street Address  |                       |                     |
| City<br><b>PAWTUCKET</b>   | State<br><b>RI</b> | Zip<br><b>02860</b>   | City  | State                 | Zip                 |
| Director Name  |                    |   | Director Name   |                       |                     |
| Street Address   |                    |   | Street Address  |                       |                     |
| City   | State              | Zip   | City  | State                 | 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  | CLASS/SERIES          | PAR VALUE           |
|  |                    |   | 1   | CLASS A VOTING COMMON | \$0.00              |

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 \_\_\_\_\_  
 Check No \_\_\_\_\_  
 By: \_\_\_\_\_

**FILED**  
**JAN 16 2015**

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

Date

**RICHARD A. SUGERMAN**

Print or Type Name of Authorized Representative

FOR SECRETARY OF STATE USE ONLY

BY 30034

**Providence Metallizing Company, Inc.**  
**Corporate ID No. 31941**

**ATTACHMENT**

**Assistant Secretary      Bruce A. Wolpert, Esq.      10 Dorrance Street, Suite 530  
Providence, RI 02903**

**FILED**  
JAN 16 2015  
BY 31941