

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of Star Corporations Divisio 148 W. River Stree Providence, RI 02904-261

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015 Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

t 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

401.222,304

aw (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00. 1. Corporate ID No. 2. Name of Corporation 136110 LFI, Inc. 3. Street Address Principal Business Office State Zip 5 INDUSTRIAL DRIVE SOUTH **SMITHFIELD** RΙ 02917 1. Business Phone No 5. State of Incorporation RHODE ISLAND 5. Brief Description of the Character of Business Conducted in Rhode Island TO ASSEMBLE, MANUFACTURE, DISTRIBUTE AND SELL MEDICAL DEVICES AND PRODUCTS 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) 🗸 FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name CLIFFORD G. BROCKMYRE, III **ROLAND BENJAMIN** Street Address Street Address 5 INDUSTRIAL DRIVE SOUTH 5 INDUSTRIAL DRIVE SOUTH City State City **SMITHFIELD** RΙ 02917 **SMITHFIELD** RI 02917 Secretary Name Treasurer Name ROLAND BENJAMIN ROLAND BENJAMIN Street Address Street Address 5 INDUSTRIAL DRIVE SOUTH 5 INDUSTRIAL DRIVE SOUTH Cin State City State **SMITHFIELD** RI 02917 **SMITHFIELD** RΙ 02917 3. NAMES AND ADDRESSES OF THE DIRECTORS: $("X" BOX FOR ATTACHMENT) <math>\square$ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name CLIFFORD G. BROCKMYRE **ROLAND BENJAMIN** Street Address Street Address 5 INDUSTRIAL DRIVE SOUTH 5 INDUSTRIAL DRIVE SOUTH City ZiD City State Zip**SMITHFIELD** 02917 **SMITHFIELD** 02917 Director Name Director Name CLIFFORD G. BROCKMYRE, III EDWARD J. KINIRY Street Address Street Address 5 INDUSTRIAL DRIVE SOUTH 5 INDUSTRIAL DRIVE SOUTH City State Citv State RI SMITHFIELD 02917 **SMITHFIELD** RΙ 02917). SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) **AUTHORIZED SHARES** ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Class/Series Number of Shares Class/Series Par Value 3.000 COMMON \$1.00 8,000 \$1.00 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 iver or trustee. Under penalty of perjury, I declare and affirm that I have examined this repor including any accompanying schedules and statements, and that all statemen contained herein are true and correct. THIOLHA S- AND BY File Date

> Roland Benjamin Print or Type Name Vice President

Title

LFI, INC. #136110

2015 Annual Report

7. Officers (cont'd)

Joseph F. Whinery, Jr. Assistant Secretary 301 Promenade Street Providence, RI 02908

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