Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

FIRST: The name of	Annual Report for the year				
	of business, brief	the laws of RHO	ERAL TOOL		
Fourth: If foreig	n corporation, a	address of its princi	pal office		
FIFTH: Business a	ddress in Rhode	Island (blank repo	orts will be	mailed to th	is
address) 127 Dorrance	Street, Pro	vidence, Rhode	Island 0	2903	
SIXTH: Names and	l addresses of its	s directors and offi	cers:		
(Addresses	must include street	and number, if any)			
Name	Office		Address		
ERNEST FOLCARELLI Director		161 Public	Street,	Providence	RI RI
THOMAS A. MEDICI	Director	u	ir	Ħ	
	Director	u	ii	Ħ	
ERNEST FOLCARELLI		17	Ħ.		
THOMAS A. MEDICI Vice President		ident"	Ħ	†I	
ERNEST FOLCARELLI	Secretary	ĮT	н	Ħ	***
THOMAS A. MEDICI (If additional space is neede		, н	it	11	
SEVENTH: Number	of Shares auth	orized:		Par Value	
No. of Shares	Series	share	or statement that shares are without par value		
600 common	A B	~~~~~~	with with	out par va out par va	lue lue
EIGHTH: Number	l: Series	or st share	Par Value or statement that shares are without par value		
600 common 600 common	A B			out par va hout par v	
Dated: February 28	19.83	KENYON TOO	•	······································	
JUN	17 1983 A.K.	By Especial Ernest FO		elli- an officer)	

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