



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** 2014

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. <b>90368</b>		2. Exact name of the Corporation <b>Digimelt, Inc.</b>			
3. Principal office address <b>118 Governor Bradford Drive</b>			City <b>Barrington</b>	State <b>RI</b>	Zip <b>02806</b>
4. Business Phone No. <b>401 247 0320</b>			5. State of Incorporation <b>RI</b>		
6. Brief description of the character of business conducted in Rhode Island <b>Patent Development</b>					
<b>LIST ALL OFFICERS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT</b>					
President Name <b>Gerald J. Diebold</b>			Vice-President Name <b>Gerald J. Diebold</b>		
Street Address <b>118 Governor Bradford Drive</b>			Street Address <b>Above</b>		
City <b>Barrington</b>	State <b>RI</b>	Zip <b>02806</b>	City	State	Zip
Secretary Name <b>Gerald J. Diebold</b>			Treasurer Name <b>Gerald J. Diebold</b>		
Street Address <b>Above</b>			Street Address		
City	State	Zip	City	State	Zip
<b>LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT</b>					
Director Name <b>Gerald J. Diebold</b>			Director Name <b>None</b>		
Street Address <b>Above</b>			Street Address		
City	State	Zip	City	State	Zip
Director Name <b>None</b>			Director Name <b>None</b>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
<b>SHARES AUTHORIZED</b>					
<b>10 SHARES ISSUED (X) BOX FOR ATTACHMENT</b>					
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
			100	one	\$0.01

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.



**FILED**  
 JAN 11 2016

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]*  
 Signature of Authorized Representative Date 1/6/16

**Gerald J. Diebold President**  
 Print or Type Name of Authorized Representative

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