

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 _ 2016

Filing Period: January 1 - March 1 · This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAI			MARCH 31 WILL HES	OLI IN A	\$25.00 PENA	ALIY FEE.		
1. Entity ID No.		2. Exact name of the Corporation						
789703	Quick Fitting Manufacturing, Inc.							
3. Principal office address		•	City	~) \	State R 1	Zip	2006	
4. Business Phone No.	 .		Warwic	. K	15 1	0	<u> 5886</u>	
4. Business Filone 140.	-950		5. State of incorporat	non }				
6. Brief description of the charac		ducted in Rhode Islan	d	<u>. </u>			-	
		_		, .		-		
manufacturer	rand sc	opplier of	quick con	nection	on tea	thnolo	9V	
7. LIST <u>ALL</u> OFFICERS (NAME						n en	of days	
President Name			Vice-President Name Executive Vice President CFO					
David B. Crompton			Frank G Kosky					
Street Address Quick Fitting, Inc.			Street Address Quick Fitting, Inc.					
70 30 Man	State	Zip	City	<i>J</i> 1 100	State _	Zip		
Warwick	RI	02886	"Warwic	JK_	BI		2886	
Secretary Name	<u> </u>	1000	Treasurer Name				-030	
Frank G. Ko	Michael C. Happas							
Street Address Quick Fitting, Inc.			Street Address Quick Fitting Inc.					
City Warwick	State	Zip	City	•	State	Zip		
8. LIST ALL DIRECTORS (NAM	IEC AND ADDRES	02886	<u>uccun</u>	<u> </u>	RI	02	880	
Director Name	IES AND ADDRES	SES) ("X BUX FUR	Director Name		ř.	· · · · · · · · · · · · · · · · · · ·		
			Director realing					
Street Address			Street Address					
	To	<u> </u>						
City	State	Zip	City		State	Zip		
Director Name	.]	<u> </u>	Director Name		1			
Street Address	Other th Address							
Street Modress			Street Address					
City	State	Zip	City	State		Zip		
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)					
This lock			NUMBER OF SHARES	CLASS/SE	RIES	PAR VALUE		
This information is currently of of State. Changes require an ad-		ice of the Secretary	10,000,000.01	90		\$ 0.0	0010	
See Section 9 of instruction sho								
This report must be executed on	behalf of the corporate	oration by an authorize	ed representative. If the	corporation	is in the hands	of a receiver	or trustee,	
	ань т орон тивс ре	executed on behalf of	the corporation by the r Under penalty of p			m that I have	harimeve	
File Date		Page 1 1 Barrie Book	this report, including					
		FILED	and that all statement					
Check No						2 /	1114	
Ву:		FEB 1 6 2016	Signature of Author	zed Repres	entative		Date	
FOR SECRETARY OF STATE I	JSE ONLY	1/1 -711-	·	•				
Form No. 630	By_	n L 1140	Print or Type Name	of Authorize	ed Representa	ve		
Revised: 01/2012	- ,	The second secon			-			