

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* 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 law (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

106921	J.N.T. Hold	ing Corporation			
3. Street Address Principal Business Office 117 Lucy Street			City Tiverton	State RI	<i>Zip</i> 02878
4. Business Phone No. 5. State of Incorporation 4010624-7595 Rhode Island			•		
	d manufacturing n	nachinery for industrial sewi			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name John F. Tallmadge			ICHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name John F. Tallmadge		
Street Address 117 Lucy Street			Street Address 117 Lucy Street		
City Tiverton	State RI	^{Zip} 02878	City Tiverton	State RI	^{Zip} 02878
Secretary Name John F. Tallmadge			Treasurer Name John F. Tallmadge		
Street Address 117 Lucy Street			Street Address 117 Lucy Street		
Cuy Tiverton	State RI	^{Zip} 02878	City Tiverton	State RI	^{Zip} 02878
8. NAMES AND ADDRESS Director Name	ES OF THE DIRE	CTORS: ("X" BOX FOR ATT	TACHMENT) FILL IN Director Name	SPACES BEFORE USIN	G ATTACHMENTS
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name	••••		Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED	r			 <i>("X" BOX FOR ATTAC!</i> TION <u>MUST</u> BE COMPLETED	, _
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
			300	Common	No Par Value
			typ: 35%		
		e corporation by an authorize corporation by the receiver of FILED	or trustee. Under penalty of pe	erjury, I declare and affirm	that I have examined this repo
File Date		FEB 1 6 2016	contained herein are		atements, and that all statement $\frac{2 - \mathcal{E} - / \mathcal{G}}{Date}$
Check No.		34 1505 ·	Signylure John F. Talln	nadge	Date
Ву:			Print or Type Name		
FOR SECRETARY OF STATE USE ONLY			President Title		****
			ine		