

State of Rhode Island and Providence Plantations Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

TOFIE						
Profit Corporation A	nnual Rep	ort for the year	2009	2013 7119 25	ф:II:49	
Filing period: January 1 -	March 1	TUIS DEDORT DV	MADOLI OA 1870 L. D			
Filing Fee: \$50.00 *FAIL 1. Entity ID Number	2. Exact nan	ne of the Corporation	WARCH 31 WILL R	ESULI IN A \$25.00	PENALTY FEE.	
44182	Bear	Hydraulia	20I c	· · · · · · · · · · · · · · · · · · ·		
3. Principal Office Address			Cîty	State	Zip	
45 Fullerto	on Ro	{	Warwick	RI	02836-14	
4. Business Phone Number			5. State of Incorporation			
401-732-5832			RI			
6. Brief description of the ch	aracter of busin	ess conducted in Rho	ode Island			
Machine	Shop		-			
7. List ALL officers (names a	and addresses)		C	heck the box to indica	ite an attachment	
President Name Vincent Cambardella			Vice-President Name			
Street Address			Street Address			
30 Wentworth Que			-1100171000			
City Warwick	State 9	2ip 02889	City	State	Zip	
Secretary Name			Treasurer Name			
Robert Gambardella Street Address			Phonas Gambardella			
12 Robert Circle			Street Address 76 Will Cove Road			
Tohnston	State 2	02919	City	State	Zip 02889	
8. List ALL directors (names	and addresses))	<u> </u>	heck the box to indica		
Director Name VXXVQ			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. Shares Authorized			10. Shares Issued	Check box to indica	te an attachment	
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
			10		NoPar	
					100401	
11. This report must be executed this report	uted on behalf o	of the corporation by a	n authorized represent	tative. If the corporation	n is in the hands of a	
receiver or trustee, this repor Under penalty of perjury, I	LINUSLUE EXECU	Red on behalf of the c	OfDoration by the recei	WAT OF Trueton		
Statements, and unat an Sta	tements conta	ined herein are true	and correct.	uaing any accompar	lying schedules and	
Name of Authorized Representative				Date	\	
Vincent Cambardella				8/	9/16	
Signature of Authorized Repr	esentative		11.67.417.1.			
(Could & C)ac	backeth		JMENT HERE		- was	
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