RI SOS Filing Number: 201734929410 Date: 2/24/2017 4:00:00 PM

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2017

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

City SEEKONK	TO DESIGN SCREENPRI ddresses) USEPPE TREET	AND AID IN THE	City PROVIDENCE ter of business cond MANUFACTURING  Vice-President Na Street Address 11	Check the CHARLES A. C	PAREL; To	idica <u>te</u> a			
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31-33 - Manufacturing  5. State of Incorporation RHODE ISLAND  7. List ALL officers (names and aderesident Name ROBERT R. DIGIL  Street Address 165 McMAHON ST  City FALL RIVER  Secretary Name CHARLES A. CAL  Street Address 116 TJ DRIVE	TO DESIGN SCREENPRI ddresses) USEPPE TREET	AND AID IN THE NTING.	MANUFACTURING  Vice-President Na	Check the CHARLES A. C	PAREL; To	idica <u>te</u> a			
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SEEKONK		Secretary Name CHARLES A. CALVERLEY, III			Treasurer Name ROBERT R. DIGIUSEPPE				
	Street Address 116 TJ DRIVE			Street Address 165 McMAHON STREET					
	State MA	<sup>Zip</sup> 02771	City FALL RIVE		State MA		Zip <b>02721</b>		
. List ALL directors (names and a	addresses)					ndicate	an attachmen		
ROBERT R. DIGIU	JSEPPE		Director Name Cl	IARLES A. CALVE	ERLEY, III				
Street Address 165 McMAHON STREET			Street Address 116 TJ DRIVE						
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Pirector Name			Director Name						
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City	State	Zip	City		State		Zip		
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This information is currently of record in the Department of State.  Changes require an additional filing.			OF SHARES	CLASS/SERIES			NO PAR		
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11. This report must be executed	1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	composition by an	authorized represe	ntative. If the corpo	ration is in	the har	nds of a receiv		
Index penalty of periury, I dec.	lare and affirm	tnat i nave exami	nea uns report, mo	luding any accom	ipanying s	schedu	ies and		
tatements, and that all statem	nents contained	herein are true a	nd correct.		Date		<del></del>		
Name of Authorized Representat	itive				2/	1 14 1	117		
CHARLES A. CALVERLEY, III					/	11/			
Signature of Authorized Represe			FIL	resident Silver	,				

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov