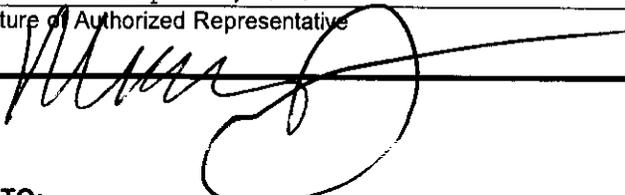


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017
Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 19719		2. Exact name of the Corporation Malco, Inc.			
3. Principal Office Address 375 Washington Street			City Providence	State RI	Zip 02903
4. Business Phone Number 401-421-4131			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island Glass Company					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment
President Name Norman E. Hopkins, Jr.			Vice-President Name Norman E. Hopkins, Jr.		
Street Address 375 Washington Street			Street Address 375 Washington Street		
City Providence	State RI	Zip RI	City Providence	State RI	Zip RI
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL officers (names and addresses)					Check the box to indicate an attachment
Director Name Norman E. Hopkins, Jr.			Director Name		
Street Address 375 Washington Street			Street Address		
City Providence	State RI	Zip RI	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100		Common	No Par
		Check box to indicate an attachment			
11. 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. <i>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.</i>					
Name of Authorized Representative Norman E. Hopkins, Jr.				Date 2/24/17	
Signature of Authorized Representative 					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

FILED

FEB 27 2017

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