



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. Corporate ID No. 000816665		2. Name of Corporation R & D Manufacturing Company, Inc.			
3. Street Address Principal Business Office 60 Dunnell Lane			City Pawtucket	State RI	Zip 02860
4. NAICS Code 31-33		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Jewelry design, manufacture and sales					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Ralph Fontaine			Vice President Name Philip J. Montalto		
Street Address 60 Dunnell Lane			Street Address 60 Dunnell Lane		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
Secretary Name Ralph Fontaine			Treasurer Name Ralph Fontaine		
Street Address 60 Dunnell Lane			Street Address 60 Dunnell Lane		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Ralph Fontaine			Director Name		
Street Address 60 Dunnell Lane			Street Address		
City Pawtucket	State RI	Zip 02860	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 1,000			10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES – THIS SECTION MUST BE COMPLETED		
Number of Shares		Class / Series	Par Value		
100 shares common no par value					

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.

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.

Signature

Date

Ralph Fontaine

Print or Type Name

President

Title

FILED

MAY 12 2017

BY

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov