



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

ANNUAL REPORT FOR THE YEAR 2018

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. 487691		2. Name of Corporation Reade International Corp.		
3. Street Address Principal Business Office 850 Waterman Avenue		City East Providence	State RI	Zip 02915
4. NAICS Code 423510		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Distributor of advanced metal, ceramic and intermetallic compositions for high technology and governmental applications.				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Emily A. S. Reade		Vice President Name Charles F. Reade, Jr.		
Street Address 850 Waterman Avenue		Street Address 850 Waterman Avenue		
City East Providence	State RI	Zip 02915	City East Providence	State RI
Secretary Name Charles F. Reade, Jr.		Treasurer Name Charles F. Reade, Jr.		
Street Address 850 Waterman Avenue		Street Address 850 Waterman Avenue		
City East Providence	State RI	Zip 02915	City East Providence	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Charles F. Reade, Jr.		Director Name		
Street Address 850 Waterman Avenue		Street Address		
City East Providence	State RI	Zip 02915	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) ☐		10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) ☐		
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 100 shares common stock of \$.01 par value	Class Series	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.

Emily A. S. Reade
Signature

3.7.2018
Date

Emily A. S. Reade
Print or Type Name

FILED

President
Title

MAR 15 2018

BY *2979205*

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