RI SOS Filing Number: 201876713960 Date: 9/5/2018 1:00:00 PM

(RE)

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:

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	2. Exact nam	2. Exact name of the Corporation				
41192	HENRY	HENRY A. EVERS CORP.				
3. Principal Office Address			City	State	Zıp	
72 OXFORD STREET			PROVIDENCE	RI	02905	
4. NAICS Code	6. Brief desc	Brief description of the character of business conducted in Rhode Island				
332110	INDUSTRIA	INDUSTRIAL DIE CUTTING				
5 State of Incorporation	 					
RHODE ISLAND	1					
7 List ALL officers (names a	nd addresses)			Check the box to in	idicate an attachment	
President Name ANTHONY J. DIIRIO			Vice-President Name JAMES A. DIIORIO & JOSEPH DIIORIO			
Street Address 72 OXFORD STREET			Street Address 72 OXFORD STREET			
City PROVIDENCE	State RI	Zip 02905	City PROVIDENCI		^{Zıp} 02905	
Secretary Name	l	<u> </u>	Treasurer Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
8. List ALL directors (names and addresses)			Check the box to indicate an attachment			
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	PR ZESSON	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Shares Authorized 10. Shar		10. Shares Iss	ssued Check the box to indicate an attachment			
This information is currently of record in the Department of State. Changes require an additional filing.			F SHARES	C. ASS/SERIES		
		600			\$0.00	
11. This report must be execu	uted on behalf of the	corporation by an	l authorized representat	tive. If the corporation is in t	he hands of a receiver or	
trustee, this report must be e	xecuted on behalf of	the corporation by	the receiver or trustee	}		
Under penalty of perjury, I estatements, and that all sta				ding any accompanying so	thedules and	
Name of Authorized Represe		A	o correct.	Date		
Anthony J. Dilorio, Preside	ent Anth	rong Al	Victor	p 9	4/18	
Signature of Authorized Repr	essentative	10				
		<u> </u>		n	<u></u>	
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Division of Business Services

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

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

1:00 SEP 0 5 2018

FORM 630 - Revised: 10/2017