



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

**Annual Report for the year: 2019**  
**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<br><i>20152</i>  |  | 2. Exact name of the Corporation<br><b>RIDCO CASTING CO.</b>  |                        |
| 3. Principal Office Address<br><b>6 Beverage Hill Avenue</b>   |  | City<br><b>Pawtucket</b>  | State<br><b>RI</b>     |
|  |  | Zip<br><b>02860</b>   |                        |
| 4. NAICS Code<br><i>331511</i>   | 6. Brief description of the character of business conducted in Rhode Island<br><b>Die casting.</b> |   |                        |
| 5. State of Incorporation<br><b>RI</b>   |  |   |                        |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |  |   |                        |
| President Name<br><b>Jeffrey A. Cohen</b>  |  | Vice-President Name<br><b>Andrew P. Lewis</b>   |                        |
| Street Address<br><b>6 Beverage Hill Avenue</b>  |  | Street Address<br><b>6 Beverage Hill Avenue</b>   |                        |
| City<br><b>Pawtucket</b>   | State<br><b>RI</b>   | City<br><b>Pawtucket</b>  | State<br><b>RI</b>     |
| Secretary Name<br><b>Jake Cohen</b>  |  | Treasurer Name<br><b>Stanley I. Cohen</b>   |                        |
| Street Address<br><b>6 Beverage Hill Avenue</b>  |  | Street Address<br><b>6 Beverage Hill Avenue</b>   |                        |
| City<br><b>Pawtucket</b>   | State<br><b>RI</b>   | City<br><b>Pawtucket</b>  | State<br><b>RI</b>     |
| 8. List ALL directors (names and addresses)  |  | Check the box to indicate an attachment <input type="checkbox"/>  |                        |
| Director Name  |  | Director Name   |                        |
| Street Address   |  | Street Address  |                        |
| City   | State  | City  | State                  |
| Director Name  |  | Director Name   |                        |
| Street Address   |  | Street Address  |                        |
| City   | State  | City  | State                  |
| 9. Shares Authorized   |  | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |                        |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.   |  | NUMBER OF SHARES  | C. ASSISFRIFS          |
|  |  | PAR VALUE   |                        |
|  |  | <b>50</b>   | <b>Class A Common</b>  |
|  |  | <b>50</b>   | <b>No Par Value</b>    |
|  |  | <b>50</b>   | <b>Class B Common</b>  |
|  |  | <b>50</b>   | <b>No Par Value</b>    |
| 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.<br><b>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.</b> |  |   |                        |
| Name of Authorized Representative<br><b>Jeffrey A. Cohen</b>   |  |   | Date<br><i>1-11-19</i> |
| Signature of Authorized Representative<br><i>Jeffrey A. Cohen</i>  |  |   | SIGN DOCUMENT HERE     |

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**

**JAN 11 2019**

FORM 630 - Revised: 10/2017

BY *2018 DS*