RI SOS Filing Number: 201989391800 Date: 3/27/2019 4:00:00 PM

State of Rhode Island Department of S Annual Report for the	State - Busin	ess Services I	Division			LEC	019 02	
Corporation → Filing period: January 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.0		ot filed by April 1.		B		2a1	1	
Entity ID Number	2. Exact nan	ne of the Corporation	1		 			
000040724	S + P He	S + P Heat Treating, Inc.						
3. Principal Office Address	· · · · · · · · · · · · · · · · · · ·		City		State	*******	Ζp	
16 Dewey Avenue			Warwick	Warwick			02886	
. NAICS Code 6. Brief description of the charact			er of business conducted in Rhode Island					
5. State of Incorporation Rhode Island	Heat treatin	ng of metals for hai	rdening and te	mpering.				
7. List Al.I. officers (names and a	addresses)	- · · · · · · · · · · · · · · · · · · ·		Che	ck the box to	indicate :	an attachment L	
President Name Arvind N. Patel	Vice-President Name Arvind N. Patel							
Street Address 30 Flintstone Court			Street Address 30 Flintstone Court					
City East Greenwich	State RI	Zip 02818	City East Gr		State RI		^{2ip} 02818	
Secretary Name Arvind N. Patel			Treasurer Name Arvind N. Patel					
Street Address 30 Flintstone Co			Street Addres	30 Flintstone Co	ourt State RI			
City East Greenwich	State Ri	^{Zip} 02818	City East G	City East Greenwich			^{Zip} 02818	
List ALL directors (names and Director Name	i addresses)		Director Name		ck the box to	ndicate i	an attachment [
Arvind N. Patel			Director Mann	•				
Street Address 30 Flintstone Co.	urt		Street Addres	S			, , , , , , , , , , , , , , , , , , ,	
City East Greenwich	State RI	^{Zip} 02818	City	City			Zip	
Director Name			Director Name					
Street Address	Street Address							
City	State	Zip	City		State		Zip	
9. Shares Authorized		10. Shares Issu		Chec			in attachment	
his information is currently of record in the epartment of State.		1000	NUMBER OF SHARES		RES	0.00		
Changes require an additional filling.								
This report must be executed rustee this report must be executed the penalty of perjury, I decured the penalty of perjury.	uted on behalf of lare and affirm t	the corporation by the hat I have examine	ne receiver or tr d this report, i	ustee.				
statements, and that all statem Name of Authorized Representat	nunts contained live	norein are true and	correct.		Date		·	
Arvind N. Patel		March 19, 2019						
Signat Va of A the size of D	entative			·				
Signature of Authorized Represe								

Division of Business Services

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

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