

Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2019
Corporation

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SECRETARY OF STATE
CORPORATIONS DIV

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

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1. Entity ID Number 444		2. Exact name of the Corporation ADVANCED CHEMICAL COMPANY			
3. Principal Office Address 105 Bellows Street		City Warwick		State RI	Zip 02888-0000
4. NAICS Code 331410		6. Brief description of the character of business conducted in Rhode Island manufacturer of precious and nonprecious plating solutions and refiner of precious metals			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment: <input type="checkbox"/>					
President Name Gerald A. Smith, III			Vice-President Name RozLynn M. Perez		
Street Address 161 Riley Smith Drive			Street Address 105 Bellows Street		
City Greenville	State SC	Zip 29615-	City Warwick	State RI	Zip 02888-
Secretary Name RozLynn M. Perez			Treasurer Name Gerald A. Smith, III		
Street Address 105 Bellows Street			Street Address 161 Riley Smith Drive		
City Warwick	State RI	Zip 02888-	City Greenville	State SC	Zip 29615-
8. List ALL directors (names and addresses) Check the box to indicate an attachment: <input type="checkbox"/>					
Director Name Gerald A. Smith, III			Director Name none		
Street Address 161 Riley Smith Drive			Street Address none		
City Greenville	State SC	Zip 29615-	City none	State none	Zip none
Director Name none			Director Name none		
Street Address none			Street Address none		
City none	State none	Zip none	City none	State none	Zip none
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment: <input type="checkbox"/>		
This information is currently of record in the Department of State.			NUMBER OF SHARES		
Changes require an additional filing.			CLASS/SERIES		
			PAR VALUE		
			1000		
			Common		
			\$1.00		
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.					
Name of Authorized Representative Gerald A. Smith, III				Date 1/07/2019	
Signature of Authorized Representative <i>Gerald A. Smith</i>				President	

FILE TO:
Division of Business Services
W. River Street, Providence, Rhode Island 02904-3664
Phone: (401) 222-3040
Website: www.sos.ri.gov

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A.A.
BY 09234
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RI DEPT OF STATE
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