

Matthew A. Brown, Secretary of State Corporations Duisson 148 W. River St Providence, RI 02004-2615

Providence NI 02904-2615 401 222 3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 · March 1 • Filing Fee: \$50.00\*

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by

I. Corporate ID No	(c&d)) is subject to a pena 2 Name of Corpor	ation		. <u>-</u> .	<u> </u>
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4. Business Phone No	emary Dr	5 State of Incorporation	1/01 th 12) ng st	2007 115T	05825
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S Brief Description of the C	haracter of Business Conducto	l in Rhode Island			<del></del> -
TO ACT A	REPRESENTATION OFFICE	ERS: ("X" BOX FOR AT	lanufactures (	of Industr	ハン( EQ U i p nut G ATTACHMENTS
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City	State	Zip	City	State	<u> </u>
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<b>3. NAMES AND ADD</b> Director Name	RESSES OF THE DIREC	TORS: ("X" BOX FOR A	TTACHMENT) [ FILL IN	SPACES BEFORE USE	ng attachments 🕛
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this report must be ex	ecuted on behalf of the	corporation by the receive	ized representative. If the c	corporation is in the han	as of a receiver or truste
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			including any acce	ompanying schedules and s	statements, and that all state
1	FILED			re true and correct.	<i>1</i> i
File Date			Micu	Puhth	1/3/07
J	AN 03 2007		Signature	_ \	Date
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By:		ار ا	Print or Type Name		
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FOR SECRETAR	RY OF STATE USE ONLY	·	Title		<del></del>



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Du is: 100 North Main Str Providence, RI 02903-15 401 222 30

Corporate ID No	2 Name of Corpor	ation				
85541	' '	uipment Associates, In	IC.			
Short Address Principal B	Cosmess Office		Cth .	Stare	7.p	
Distress Phone No.	emany Ur	1-8-7	Morthkysto	wa RI	0225	
207 439 3	7018	5 State of Incorporat			5-SIC Code	
Bud Description of the O	raracter of Business Conducte		<del></del>		2634	
			IDUSTRIAL EQUIPMENT.			
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tremal.Livers	^	<del></del>	Street stadies s			
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ceretan Nove	o fi		Treasure Name		······································	
Michael	rwhite.		Street Address	<del></del>		
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FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this reincluding any accompanying schedules and statements, and that all statem contained herein are true and correct



Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1 - March J • Filing Fee: \$50.00

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	ss Principal Busine			City	State	7ip		
·	emary Drive	· · <del>- · · · · · · · · · · · · · · · · ·</del>		North Kingstown	RI	02852		
4. Business Ph		000 2010	5. State of Incorpora	tion		6. SIC Code		
1	-	789-7943	Rhode Island			2634		
7. Brief Descri	ption of the Charac	cter of Business Cond	ucted in Rhode Island		· <del></del>			
·				industrial equipment				
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Secretary Name		RI	02852	North Kingstown	RI	02852		
Michael				Treusurer Name				
Siren Address		<del></del>	<del></del>	Michael P. White				
	mary Drive			Sine Address				
City	mary Diive	Sac	12:	.125 Rosemary Drive	<del></del>			
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				this report, including any				
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# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

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(FORM MUST BE TYPED IN E					
1. Corporate ID No.	2. Name of Corporat			<del></del>	_
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A. Business Phone No.	3) -4/0/	5. State of Incorporation	North King	stown IT	02832
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7. Brief Description of the Chara	cter of Business Conducted In	Rhode Island			2034
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Michael	r. White		-None		
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	101	4 4:444	Treasurer Name		
Micha	el Pwhi.	fe	Michi	(P.whit	~ <u>~</u>
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FOR SECRETAI	RY OF STATE USE ONLY	

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

Muse Pu	hier	2/18/02
Signature of Officer		Date
Michael P.	White	

Print or Type Name of Officer

Title of Officer



File Date:

FOR SECRETARY OF STATE USE ONLY

Corporations Divisi-100 North Main Street, Providence, RI 02903-13 401-222-30

Office of the Secretary of State PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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 hereig are true and correct.



(FORM MUST BE TYPED IN BL	ACK)				
1. Corporate III No. 541	2 Name of Corpara Industria	Equipment Asso	ciates, Inc.	···································	
3. Street Address Principal Busines 23 BACWN 51 4. Business Phone No.		6 fine of the const	North Kingstown	State RI	2 2 8 Z
401 - 255-07.  Brief Description of the Charact	OOO	5. State of Incorporation RHODE ISLAND			* 2634°
TO ACT as a 8. NAMES AND ADDRE President Name	ropresonat SSES OF THE OFFI	ive for manufact ICERS ("X" BOX FOR ATTACH	JVOS GOLIAGUS TR'4( IMENT) — FILL IN SPACES BE Vice President Name	しぞいい かんぱ FORE USING ATTACHM	ENTS
Michael P. 1			· Street Address		
No. K. nystow.	T, #104	Zip	: City	State	Zip
No. Kingstow	n RI	02852			
Michael P	. White		Treasurer Name  MichaelP.  Street Address  23 Brown ST,	white	
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9. NAMES AND ADDRE. Director Name	SSES OF THE DIR	ECTORS ("A" BOX FOR ATTA	Director Name	BEFORE USING ATTACH	IMEN15
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inis report must be sign	n <b>ea in ink</b> by eiti 	ner the President, vice P 	resident, Secretary, Assista	int Secretary, Treasurer	, Receiver or Trust
1		i061			



James R. Langevin, Secretary of Sta Corporations Division 100 North Main Street, Providence, RI 02903-13. 401-222-30-

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

3. Street Address Principal Business Office 23 Brown Street, #104 4. Business Phone No. 5. State of Inc.	nent  FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name  Street Address  City State Zip  Treasurer Name White, Michael P.  Street Address 23 Brown Street, #104  State RI  Zip 02852
23 Brown Street, #104  4. Business Phone No 401-295-0100  7. Brief Description of the Character of Business Conducted in Rhode Island To act as representative for manufacturers for industral equipme  8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX F President Name White, Michael P.  Street Address 23 Brown Street, #104  City State Address 23 Brown Street, #104  City Name White, Michael P.  Street Address 23 Brown Street, #104  City State Address 23 Brown Street, #104  City North Kingstown RI  O285  Secretary Name White, Michael P.  Street Address 23 Brown Street, #104  City State Address 23 Brown Street, #104  City North Kingstown RI  O285  9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX Director Name)	North Kingstown I RI 02852  **Rhode Island 6. SIC Code 2634  **The Attachment Fill In Spaces Before Using Attachments Vice President Name  **Street Address**  **Street Address**  **Treasurer Name White, Michael P.  **Street Address**  23 Brown Street, #104  **State RI Zip 02852  **OX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
401-295-0100 Rind Description of the Character of Business Conducted in Rhode Island To act as representative for manufacturers for industral equipme 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX F President Name White, Michael P.  Street Address 23 Brown Street, #104  City State Zip North Kingstown RI 0285  Secretary Name White, Michael P.  Street Address 23 Brown Street, #104  City State Address 23 Brown Street, #104  City North Kingstown RI 0285  9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX Director Name)	Thode Island  FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name  Street Address  City State Zip  Treasurer Name White, Michael P.  Street Address 23 Brown Street, #104  City State Zip  Ozenset Address City State Zip  Treasurer Name White, Michael P.  Street Address City Street, #104  Street Address City North Kingstown RI  Ozenset Zip  Ozen
To act as representative for manufacturers for industral equipmes.  8. NAMES AND ADDRESSES OF THE OFFICERS (*x* BOX F President Name White, Michael P.  Street Address 23 Brown Street, #104  City State RI 0285  Secretary Name White, Michael P.  Street Address 23 Brown Street, #104  City State Address 23 Brown Street, #104  City State RI 0285  9. NAMES AND ADDRESSES OF THE DIRECTORS (*x* BOX Director Name)	FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name  Street Address  City State Zip  Treasurer Name White, Michael P.  Street Address 23 Brown Street, #104  City North Kingstown RI  Zip  02852  OX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
President Name White, Michael P.  Street Address 23 Brown Street, #104  City North Kingstown RI 0285  Secretary Name White, Michael P.  Street Address 23 Brown Street, #104  City North Kingstown RI 0285  P. North Kingstown RI 0285  9. NAMES AND ADDRESSES OF THE DIRECTORS (**X** BOX Director Name)	Street Address  City State Zip  Treasurer Name White, Michael P.  Street Address 23 Brown Street, #104  City State Zip  Treasurer Name White, Michael P.  Street Address 23 Brown Street, #104  State RI  Zip  02852  OX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
23 Brown Street, #104  City State Zip O285  Secretary Name White, Michael P.  Street Address 23 Brown Street, #104  City North Kingstown RI 0285  9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX Director Name	City State Zip  Treasurer Name White, Michael P.  Street Address 23 Brown Street, #104  City State Zip  Ozenation RI  Zip  Ozenation RI  Ozenation State RI  Ozenation RI  Ozenation State
North Kingstown RI 0285  Secretary Name White, Michael P.  Street Address 23 Brown Street, #104  City State Zip North Kingstown RI 0285  9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX Director Name	Treasurer Name White, Michael P.  Street Address 23 Brown Street, #104  City North Kingstown RI  DX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
White, Michael P.  Street Address 23 Brown Street, #104  City State Zip North Kingstown RI 0285  9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX Director Name	White, Michael P.  Street Address 23 Brown Street, #104  State RI  O2852  OX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
23 Brown Street, #104  City State Zip North Kingstown RI 0285  9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX Director Name	23 Brown Street, #104  City State RI Zip 02852  DX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
North Kingstown RI 0285  9. NAMES AND ADDRESSES OF THE DIRECTORS (*x* BOX Director Name)	North Kingstown RI 02852  OX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
Director Name	
Street Address	
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Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES	11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) INSUED SHARES
Number of Shares Class/Series Par Value Common	Number of Shares Class/Series Par Value Common
8,000.00 Stock none	100.00 Stock none

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements,
F" ED	that all statements contained herein are true and correct
FEB 2 8 2000	Signature of Officer Date  Michael P. Wilhte
CRETARY SU STATE USE ONLY	Print or Type Name of Officer  Vesicle ot.
CREEARY OF STATE USE ONLY	THE OF OFFICE Side St.



fames R. Langevin, Secretary of St Corporations Divis 100 North Main Street, Providence, RI 02903-13 401-277-36

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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4 Butters Phone No. 401-295-0100 Rhode Island  7. Brief Description of the Character of Bustines Conducted in Rhode Island  To act as representalive for manufacturers for Industral equipment  8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)  Freighten Name  Gardiner, George P.  Street Address 23 Brown Street, #104  City North Kingstown  Street Address 23 Brown Street, #104  City North Kingstown  Fire Address 23 Brown Street, #104  City North Kingstown  RI  249  258-25  City Street Address 23 Brown Street, #104  City North Kingstown  RI  20852  City North Kingstown  RI  20852  City Street Address 23 Brown Street, #104  City North Kingstown  RI  20852  City Street Address 23 Brown Street, #104  City North Kingstown  RI  City Street Address  Street Address  Street Address  Street Address  Street Address  City Street  Common  Common  Common  R)  R) OOO  Stock  None  R) OOO  Stock None	(FORM MUST BE TYPED	IN BLACK)							
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A01-295-0100 Rhode Island  7. Brief Deteription of the Character of Business Conducted in Robe Island  To act as representative for manufacturers for industral equipment  8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) User President Name Gardiner, George P.  Street Address 23 Brown Street, #104  City North Kingstown  State RI  24 Description Name Gardiner, George P.  Street Address 23 Brown Street, #104  City North Kingstown  State RI  25 Tressure Name Gardiner, George P.  Street Address 23 Brown Street, #104  City North Kingstown  State RI  26 Street Address  City State  Street Address  Street Address  Street Address  City State  Street Address  City State  Street Address  City State  City State  Zip  Common  B,000.00  Stock  none  R,000.00	•				. · · · · · · · · · · · · · · · · · · ·	1 '	Zip 02852		
To act as representative for manufacturers for industral equipment  8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FUR ATTACHMENT)	401-295-0100			Rho		<del></del>	6. SIC Code 2634		
8. NAMES AND ADDRESSES OF THE OFFICERS (X, BOX FUR ATTACHMENT)  President Name Gardiner, George P.  Street Address 23 Brown Street, #104  City North Kingstown  Street Address 23 Brown Street, #104  City North Kingstown  Street Address 23 Brown Street, #104  City North Kingstown  Street Address 23 Brown Street, #104  City North Kingstown  RI  02852  City Street Address 23 Brown Street, #104  City North Kingstown  RI  02852  City North Kingstown  RI  02852  City State RI  22p 02852  North Kingstown  RI  02852  City State  City Sta							<del></del>		
President Name Gardiner, George P  Street Address 23 Brown Street, #104  City North Kingstown RI  02852  City State  City State  City State  City State  Cardiner, George P.  Street Address 23 Brown Street, #104  City North Kingstown Street, #104  City North Kingstown Street, #104  City North Kingstown RI  02852  City State  City Sta	8. NAMES AND ADI	DRESSES OF THE	OFFIC	ERS ("X" BOX FOR	ATTACITMENT)	<del></del>			
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Gardiner, George P.  Street Address 23 Brown Street, #104  City North Kingstown RI  O2852  9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) Director Name  Street Address  City State  Director Name  Director Name  Street Address  Street Address  Street Address  City State  Zip  City State Zip  City Sta	City North Kingstowi		RI		City	State	Zip		
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North Kingstown RI 02852 North Kingstown RI 02852  9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" HOX FOR ATTACHMENT) T 3  Director Name  Street Address  City State Zip City State Zip  Director Name  Street Address  Street Address  Street Address  City State Zip  10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) T 11. SHARES ISSUED ("X" ROX FOR ATTACHMENT T 11. SHARES ISSUED ("X" ROX FOR A	Street Address 23 Brown Street, #104				Street Address				
Director Name  Street Address  City State   Zip   City   State   Zip    Director Name  Director Name  Street Address  City   State   Zip   City   State   Zip    City   State   Zip   City   State   Zip    ON SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)   II. SHARES ISSUED ("X" BOX FOR ATTACHMENT)   III. SHARES ISSUED ("X" BOX FOR ATTACHMENT)   I			RI				Zip 02852		
Street Address  Street Address  City State Zip City State Zip  Director Name  Director Name  Street Address  Street Address  City State Zip  City State Zip  10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)    AUTHORIZED SHARES  Number of Shares Class/Series Par Value Number of Shares Common  Common  Stock none 100.00 Stock none		PRESSES OF THE	DIREC	TORS ("X" BOX F	OR ATTACHMENT)				
City   State   Zip   City   State   Zip    Director Name   Director Name    Street Address   Street Address    City   State   Zip   City   State   Zip    10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)   SSUED SHARES    Number of Shares   Class/Series   Par Value   Number of Shares   Class/Series   Par Value    Common   Stock   none   100.00   Stock   none	Director Name				Director Name				
Director Name  Director Name  Street Address  City State Zip City State Zip  10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)   AUTHORIZED SHARES  Number of Shares  Common Common  8 000 00 Stock	Street Address	<u>-</u> ···		· - <del></del>	Street Address				
Street Address  City State Zip City State Zip  10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) III. SHARES ISSUED (*X* BOX FOR ATTACHMENT)  AUTHORIZED SHARES  Number of Shares Class/Series Par Value Number of Shares Common Stock none 100.00 Stock none	City	State		; Zip	City	State	Zip		
City   State   Zip   City   State   Zip   Zip    10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)	Director Name	**** • • • • • • • • • • • • • • • • •	**	*** • ************	Director Name				
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)  AUTHORIZED SHARES  Number of Shares  Common  8,000.00  Stock  Common  Tone  Common  Stock  Common  Tone  Common  Tone	Street Address			•	Street Address				
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Number of Shares  Common  8,000.00  Stock  Number of Shares  Class/Series  Par Value  Common  Stock  Number of Shares  Class/Series  Par Value  Common  Stock  Number of Shares	AUTHORIZED SHARES		_		•	· · · · · · · · · · · · · · · · · · ·			
8,000.00 Stock none 100.00 Stock none	Number of Shares			Par Value			Par Value		
This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Traceura, Possium	8,000.00	Stock	<del></del>	none	100.00		none		
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James R. Langevin, Secretary of St Corporations Divis 100 North Main Street, Providence, RI 02903-13 401-277-3(

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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85541	1	istrial Equip	ment Associates.	Inc.	
Street Address Principal Busine 23 Brown St	ss Office : #104		North Kings	State Lown - RI	<sup>Zip</sup> 02852
. Rusiness Phone No.		5. State of Incorporation Rhode	Island		6. SIC Code 2.0.34
Brief Description of the Charac	ter of Business Conducted in i	Rhode Island ive for manu	facturers for inc	dustrial equi	pment and
NAMES AND ADDRE	all—services SSES OF THE OFFIC	=related=the ERS ("X" BOX FOR ATTAI	neto.	<del></del>	·
resident Name George P. G			Vice President Name	<del></del>	
iren Address 23 Brown St	#104		Street Address	<del></del>	
North Kings	itown RI	02852	City	State	Zip
ecretary Name George F. 6	ardiner	····I·······	Treasuser Name George P. Ga	l ardiner	
irea Address 23 Brown St	#104		Street Agazess Brown St.	#104	
North Kings	Stawn RI	<sup>Zip</sup> 02852	Ciry North Kingst	own RI	<sup>Zip</sup> 02852
. NAMES AND ADDRE	SSES OF THE DIREC	TORS ("X" BOX FOR AT	TACHMENT)		<del>!</del>
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Virector Name		.ees.fs.e	Director Name	•••••••••••••••	
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ity	State	Zip	City	State	Zip
O. SHARES AUTHORIZ	ED ("X" BOX FOR ATTAC	HMENT)	11. SHARES ISSUED (*X*	BOX FOR ATTACHMENT)	0
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me report minst na 218	ucu in ink by cithe	r ine rresident, Vice	President, Secretary, Assista	ant Secretary, Treasur	er, Receiver or Tru



James R. Langevin, Secretary of Star Corporations Divisio 100 North Main Street, Providence, RI 02903-133 401-277-304

### PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 85541

2. Name of Corporation

Industrial Equipment Associates, Inc.

· 3. Street Address Principal Business Office State 2.1p 580 Ten Rod Road North Kingstown RI 02852 4. Business Phone No. 5. State of Incorporation 6. SIC Code **RHODE ISLAND** 2634

To act as a represent	er of Husiness ative for	Conducted II manufa	t Rhode Island Cturers for indust	trial equipment and to pro	ovide all services	related thereto.
8. NAMES AND ADDRE President Name George P. Gardiner	SSES OF T	HE OFFI	CERS ("X" BOX FOR AT	TACHMENT)  Vice President Name  : :		
Street Address 580 Ten Rod Road				Street Address		
cuy North Kingstown	State	RI	7.1p 02852	City	State	Zip
Secretary Name George P. Gardiner				Treasurer Name George P. Gardiner		
Street Address 580 Ten Rod Road				Street Address - 580 Ten Rod Road		
City North Kingstown	State	RI	21p 02852	<i>Clly</i> North Kingstown	State RI	zip 02852
9. NAMES AND ADDRES Director Name None	SSES OF T	HE DIRE	CTORS (*X* BOX FOR	ATTACHMENT) Director Name		
Street Address				Street Address		
Сіту	State		Zip	City	State	Zip
Director Name			• •	Director Name		
Street Address				Street Address		
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10. SHARES AUTHORIZ	ED AND I	SSUED (*	X* BOX FOR ATTACHMEN	TVT) SNARKS		
Number of Shares	Class/S	eries	Par Value	Number of Shares	Class/Series	Par Value
8,000 SHS COMM N	IO PAR V	'AL		100.00	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste

	* 8 5 5 4 1 *
ndustrial	Equipment Associates, Inc.
File Date:	3/3/197
Check No.:	
By:FOR SECRETAR	LY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and

GEORGE P. GARDINER

Print or Type Name of Officer President

Title of Officer



### **PROFIT CORPORATION ANNUAL REPORT**

Filing Period: January 1-March 1

Filing Fee: \$50.00



#### State of Rhode Island and Providence Plantation James R. Langevin, Secretary of State

Corporations Division

100 North Main Street
Providence. Rhode Island 02903-1335 • (401) 277-30.

1. CORPORATE ID NO.	2. NAVE OF CORPORATION	PLEASE TYPE OR PR	INT IN BLACK INK.		
85541	Industri	al Equipment	Associates, I		
3. STREET ADDRESS PRINCIPAL BUSINESS OFFI 580 Ten Rod Roa	d d	·	North Kingsto	wn, staff RI	02852
4 BUSINESS PHONE NO.		5. STATE OF INCORPORATION	<u></u>		6. SAC COOE
		Rhode Isla	nd		2634
To act as a rep equipment and t	resentative o provide al	for manufact <u>l services</u> r	elated thereto	١.	
PRESIDEITI NAVE		ES AND ADDRE	SSES OF THE OF	FICERS	
George P. Gardi	ner		THE PACSISON HAVE		
STREET ADDPESS			STREET ADDRESS		······································
580 Ten Rod Roa	d I state				
<b></b>	SIAIE	ZP CODE	ary	STATE	ZIP C000E
North Kingstown	RI	02852	TREASURER NAVE		
George P. Gardi	ner	<del></del>	George P. Gar	diner	
580 Ten Rod Roa	d		580 Ten Rod R	oad	
ary	STATE	ZIP CODE	ατγ	STATE	21P COOK
North Kingstown		02852	North Kingsto	wn RI	02852
DIRECTOR NAME	9. NAM!	ES AND ADDRE	SSES OF THE DI	RECTORS	
NONE			DIRECTOR NAME		
STREET ADDRESS	<del></del>	· · · · · · · · · · · · · · · · · · ·	STREET ADDRESS		
aiv	STATE	ZIP COOE	aiy	STATE	210 0005
DIRECTOR NAME					
			DIRECTOR HAVE		
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OTTY -	STATE	ZP C00E	OIY .	STATE	<i>Ъ</i> ₽ <b>2</b> 30€
	1 0 . S H A	RES AUTHORIZ	ED AND ISSUED		
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8000.00	Common N	o Par Value	100.00	Common	No Par Value
				1	3

This report must be SIGNED IN INK by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of por	fury, I declare and affirm that I have exam	nined ti
report, including any	accompanying schedules and statements	and ti
all stateau as contain	ned here o die troe and correct.	
Sale /	Millian	
	1 carriery	
Signature of Officer		

Title of Officer

For Secretary of State Use Only

Industrial Equipment Associates, Inc.

By:

File Date:

Check No: