State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED
FEB 0 5 2020 SV

Annual Report for the ye	ar: 2020
Cornoration	

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

	FEB 0 5 2020 SU
7¥ _	13413

1 Entity ID Number	2. Exact nan	2. Exact name of the Corporation							
68263	General	General Plating, Inc.							
3. Principal Office Address		·	City		State	Zip			
236 Main Channel, #1			Warwick		RI	02889			
4. NAICS Code	6. Brief desc	6. Brief description of the character of business conducted in Rhode Island							
331410	General bu	General business of electroplating							
5. State of Incorporation									
Rhode Island									
7. List ALL officers (names a	nd addresses)				eck the box to indi	cate an attachment 🔲			
Pres dent Name Peter K. Dietrich			Vice-President Name Peter K. Dietrich						
Street Address 236 Main Channel, #1			Street Address 236 Main Channel, #1						
City Warwick	State RI	Zip 02889	City Warwick		State RI	Z p 02889			
Secretary Name Peter K. Diet	rich		Treasurer Nar	Freasurer Name Peter K. Dietrich					
Street Address 236 Main Channel, #1			Street Address 236 Main Channel. #1						
C ty Warwick	State RI	Zip 02889	City Warwick		State RI	Z ₁₀ 02889			
8. List ALL directors (names	and addresses)	<u> </u>	<u> </u>	Che	eck the box to indi	cate an attachment 🔲			
Director Name None			Director Name	e		-			
Street Address		Street Address							
C ty	State	Zip	City		State Zip				
Director Name			Director Name						
Charl Address									
Street Address			Street Addres	S					
City	State	Zip	City		S:ate	Zio			
9. Shares Authorized		10. Spares Issued		Check the box to indicate an attachme		cate an attachment 🔲			
This information is currently of Department of State.	f record in the	NUMBER C	F SHARES	CLASS/SER ES		PAR VALUE			
•	***	2000		CNP	:	50			
Changes require an additional	filing.								
11 This report must be exec	uted on behalf of the	corporation by an	authorized repres	sentative. If the co	progration is in the	hands of a receiver or			
trustee, this report must be e	xecuted on behalf o	f the corporation by	the receiver or to	rustee	•				
Under penalty of perjury, I statements, and that all sta				including any ac	companying sch	edules and			
Name of Authorized Represe	ntative	i nerem are true ar	io correct.		Date				
Peter K. Dietrich, Presiden		2-3-2020							
Signature of Authorized Repu	esentat ve	2			•				

MAIL TO:

Division of Business Services

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

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