



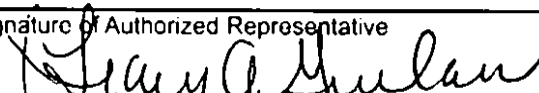
State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

- Filing period: February 1 - May 1
 → Filing Fee: \$50.00
 → Penalty: Additional \$25.00 fee if form is not filed by May 31.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

1. Entity ID Number 80113		2. Exact name of the Corporation PIATEK MACHINE COMPANY, INC.		2023 JAN 23 P 1:39										
3. Principal Office Address 25 Monticello Road		City Pawtucket	State RI	Zip 02861										
4. NAICS Code 332710	6. Brief description of the character of business conducted in Rhode Island Machine Shop													
5. State of Incorporation RI														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Tracy Greenlaw			Vice-President Name Tracy Greenlaw											
Street Address 25 Monticello Road			Street Address 25 Monticello Road											
City Pawtucket	State RI	Zip 02861	City Pawtucket	State RI	Zip 02861									
Secretary Name Tracy Greenlaw			Treasurer Name Tracy Greenlaw											
Street Address 25 Monticello Road			Street Address 25 Monticello Road											
City Pawtucket	State RI	Zip 02861	City Pawtucket	State RI	Zip 02861									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Tracy Greenlaw			Director Name None											
Street Address 25 Monticello Road			Street Address											
City Pawtucket	State RI	Zip 02861	City	State	Zip									
Director Name None			Director Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
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. Changes require an additional filing.		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">NUMBER OF SHARES</th> <th style="width: 33%;">CLASS/SERIES</th> <th style="width: 33%;">PAR VALUE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">351</td> <td style="text-align: center;">Common</td> <td style="text-align: center;">No Par Value</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	351	Common	No Par Value			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
		351	Common	No Par Value										
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 Tracy Greenlaw				Date 1-20-23										
Signature of Authorized Representative 				FILED										

JAN 23 2023
 BY ML 45014H
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