



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

FEB 14 2023 STAMP
 6670.02

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

1. Entity ID Number 117469		2. Exact name of the Corporation DESIGN TOOL, INC.			
3. Principal Office Address 795 Hatchery Road			City North Kingstown	State RI	Zip 02852
4. NAICS Code 238350		6. Brief description of the character of business conducted in Rhode Island To engage in the business of tooling and product development for injection molded plastic products.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Alexander J. Krajewski, Jr.			Vice-President Name Diane Krajewski		
Street Address 795 Hatchery Road			Street Address 795 Hatchery Road		
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852
Secretary Name Richard E. Fleury, Esquire			Treasurer Name Diane Krajewski		
Street Address 33 College Hill Road, Bldg. 20			Street Address 795 Hatchery Road		
City Warwick	State RI	Zip 02886	City North Kingstown	State RI	Zip 02852
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name none			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
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.			NUMBER OF SHARES		
			CLASS SERIES		
			100	Common	No Par
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 Alexander J. Krajewski, Jr., President				Date 2/5/23	
Signature of Authorized Representative <i>Alexander J. Krajewski, Jr. - PRESIDENT</i>					

MAIL TO:
 Division of Business Services
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