



**State of Rhode Island  
Department of State - Business Services Division**

Annual Report for the year: **2024**

Corporation \_\_\_\_\_

JAN 29 2024  
40543 *or*

- 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<br><b>000010911</b>   |                    | 2. Exact name of the Corporation<br><b>Toolcraft/Ru-Mart, Inc</b>   |  |                    |                        |
| 3. Principal Office Address<br><b>767 Hartford Avenue</b>   |                    |   | City<br><b>Johnston</b>                          | State<br><b>RI</b> | Zip<br><b>02919</b>    |
| 4. NAICS Code<br><b>31-33 Manufacturing</b>   |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>Metals Stampings</b>                |  |                    |                        |
| 5. State of Incorporation<br><b>RI</b>  |                    |   |  |                    |                        |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                    |   |  |                    |                        |
| President Name<br><b>Joseph R. Bertoldi</b>   |                    |   | Vice-President Name<br><b>Joseph R. Bertoldi</b> |                    |                        |
| Street Address<br><b>50 Regina Drive</b>  |                    |   | Street Address<br><b>50 Regina Drive</b>         |                    |                        |
| City<br><b>Scituate</b>   | State<br><b>RI</b> | Zip<br><b>02857</b>   | City<br><b>Scituate</b>                          | State<br><b>RI</b> | Zip<br><b>02857</b>    |
| Secretary Name<br><b>Debra L. Bertoldi</b>  |                    |   | Treasurer Name<br><b>Joseph R. Bertoldi</b>      |                    |                        |
| Street Address<br><b>50 Regina Drive</b>  |                    |   | Street Address<br><b>50 Regina Drive</b>         |                    |                        |
| City<br><b>Scituate</b>   | State<br><b>RI</b> | Zip<br><b>02857</b>   | City<br><b>Scituate</b>                          | State<br><b>RI</b> | Zip<br><b>02857</b>    |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |   |  |                    |                        |
| Director Name<br><b>Joseph R. Bertoldi</b>  |                    |   | Director Name                                    |                    |                        |
| Street Address<br><b>50 Regina Drive</b>  |                    |   | Street Address                                   |                    |                        |
| City<br><b>Scituate</b>   | State<br><b>RI</b> | Zip<br><b>02857</b>   | City   | State              | Zip                    |
| Director Name   |                    |   | Director Name                                    |                    |                        |
| Street Address  |                    |   | Street Address                                   |                    |                        |
| City  | State              | Zip   | City   | State              | Zip                    |
| 9. Shares Authorized  |                    | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |  |                    |                        |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.  |                    | NUMBER OF SHARES  |  | CLASS/SERIES       | PAR VALUE              |
|   |                    | 2   |  | CLASS A            | NO PAR                 |
|   |                    | 98  |  | CLASS B            | 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. |                    |   |  |                    |                        |
| <b>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.</b>                                       |                    |   |  |                    |                        |
| Name of Authorized Representative<br><b>Joseph R. Bertoldi</b>  |                    |   |  |                    | Date<br><b>1/26/24</b> |
| Signature of Authorized Representative<br><i>Joseph R. Bertoldi</i>   |                    |   |  |                    |                        |

**MAIL TO:**  
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