RI SOS Filing Number: 202578365770 Date: 9/18/2025 3:42:00 PM

State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD '25 SEP 18 PM3:37:27

Annual Report for the year: 2021
Corporation

→ 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	2. Exact name of the Corporation
000105501	ToolLab, Inc.

3. Principal Office Address	City	State	Zip
65 Manchester Street	West Warwick	RI	02893

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
423390	Manufacture and Direct Sales of Temporary Wall Systems and related products.
5. State of Incorporation: RI	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Street Address	City	State	Zip
Charles Melino Sr	303 Norwood Ave	Cranston	RI	02905

Vice-President Name	Street Address	City	State	Zip
Charles Melino Jr	303 Norwood Ave	Cranston	RI	02905

Secretary Name	Street Address	City	State	Zip
same as above				

Treasurer Name	Street Address	City	State	Zip
same as above				

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. Shares Authorized — 10. Shares Issued — Check the box to indicate an attachment ☐

This information is currently of record in the Department of State.

Changes require an additional filing.

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
500		0.00

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: Charles Melino Jr — Date: 9/16/25

Signature of Authorized Representative: Charles Melino

FILED
SEP 18 2025
BY BR344

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MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 630- Revised: 12/2023