

State of Rhode Island and Providence Plantations Department of State - Business Services Division 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 [Email: corporations@sos ri gov [Website: www.sos ri gov [

HOPE HOPE	r) 222-3040 El	nan: corporations@s	sos.ri.gov Website: ww	vw.sos.ri.gov 25 11 6 25	7"H: 63	
Profit Corporation A						
Filing period: January 1 - I	March 1					
Filing Fee: \$50.00 *FAILU	JRE TO FILE	THIS REPORT BY	MARCH 31 WILL R	ESULT IN A \$25.00	PENALTY FEE	
Entity ID Number	2. Exact nam	e of the Corporation				
44185	Bear	Hydraulia	on Inc			
3. Principal Office Address			City	State	Zip	
45 Fullerton Rd			Warwick	RI	02886-142	
4. Business Phone Number			5. State of Incorporation			
401-732-5			RI			
Brief description of the cha	1 _	ess conducted in Rho	ode Island			
	Shop					
7. List ALL officers (names and addresses)			Check the box to indicate an attachment			
President Name Vincent Cambardella			Vice-President Name			
Street Address			Street Address			
30 Wentworth Que			Olivet Address			
City Warwick	State 9	Zip 02889	City	State	Zip	
Secretary Name	1 (0)	102081	Treasurer Name			
Robert Gambardella			thomas Gambardella			
Street Address			Street Address			
12 Robert Circle			76 Mill Cove Road			
otendot	State	02919	City	State	Zip (0'2889	
8. List ALL directors (names a Director Name	and addresses)		<u>Cl</u>	neck the box to indicat	te an attachment	
			Director Name			
Street Address			Street Address			
			Street Address			
City	State	Zip	City	State	Zip	
9. Shares Authorized			10. Shares Issued	Check box to indicat	e 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	
			(0		No Par	
 This report must be executed executed trustee, this report 	Thusi de execu	tea on benalt of the d	Compression by the receiv	or or truptoo	4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	
Under penalty of perjury, I d statements, and that all stat	leclare and affi tements contai	rm that I have exam	nined this report inclu	iding any accompan	ying schedules and	
Vame of Authorized Represer	ntative			Date		
Vincent 6	amban	della		8/9/16		
Signature of Authorized Repre	esentative	SIGN DOC	JMENT HERE			
(Jule) publ	udu		JIVILIA I LICKE		m	
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