



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022  
Corporation

STAMP  
FEB 04 2022  
2958102

- 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 <b>11904</b>		2. Exact name of the Corporation <b>TOBI-BRO TOOL CO, INC.</b>			
3. Principal Office Address <b>1370 Elmwood Ave</b>		City <b>Cranston</b>		State <b>R.I.</b>	Zip <b>02910</b>
4. NAICS Code <b>813910</b>		6. Brief description of the character of business conducted in Rhode Island <b>MANUFACTURER</b>			
5. State of Incorporation <b>R.I.</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 <b>Thomas M. Walsh</b>			Vice-President Name <b>ROBERT K. WALSH</b>		
Street Address <b>26 Pocock St.</b>			Street Address <b>SAME AS ABOVE</b>		
City <b>WARWICK</b>	State <b>R.I.</b>	Zip <b>02888</b>	City	State	Zip
Secretary Name <b>ROBERT K. WALSH</b>			Treasurer Name <b>Thomas M. Walsh</b>		
Street Address <b>350 CONDOE Hill Rd.</b>			Street Address <b>SAME AS ABOVE</b>		
City <b>Saunderstown</b>	State <b>R.I.</b>	Zip <b>02874</b>	City	State	Zip
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name			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 <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.  Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			<b>220</b>	<b>COM</b>	<b>NO PAR</b>
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 <b>Thomas M. Walsh</b>					Date <b>2/2/22</b>
Signature of Authorized Representative <i>Tom M. Walsh</i>					

MAIL TO:  
Division of Business Services  
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