



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

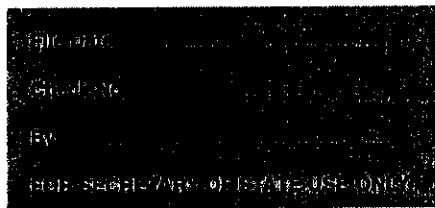
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 542704		2. Exact name of the Corporation SOLID OAK, INC.			
3. Principal office address 101 Airport Road			City Westerly	State RI	Zip 02891
4. Business Phone No. (401) 637-4855			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island Sale of goods wholesale					
President Name Steven Lord			Vice-President Name Chris Servidio		
Street Address 18 Hickory Lane			Street Address 50 Boombridge Road		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Secretary Name Steven Lord			Treasurer Name Chris Servidio		
Street Address 18 Hickory Lane			Street Address 50 Boombridge Road		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Director Name Steven Lord			Director Name Chris Servidio		
Street Address 18 Hickory Lane			Street Address 50 Boombridge Road		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
SHARES AUTHORIZED			NO. SHARES ISSUED (SEE BOX FOR ATTACHMENT)		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			1000	Common	No par

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.

FILED

Steven H. Lord 1-20-14
 Signature of Authorized Representative Date

JAN 22 2014

Steven Lord
 Print or Type Name of Authorized Representative

BY 2206