

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 2016

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

. Entity ID No.	2 Evant na	me of the Comoration			
000136718	2. Exact name of the Corporation D & D Metal works, Inc.				
Principal office address 30 Starline Way			City Cranston	State RI	Zip 02921
4. Business Phone No. 401-353-8638			5. State of Incorporation Rhode Island		
. Brief description of the char To engage in all activ				wful activity.	J 959 H 969 2
LIST <u>ALL</u> OFFICERS (NA	MES AND ADD	RESSES) ("X" BOX FOR A	TTACHMENT)	• • • • • • • • • • • • • • • • • • • •	22
President Name Duane M. Laurie, Jr.			Vice-President Name Sandra M. Laurie		
Street Address 30 Starline Way			30 Starline Way		
ity Cranston	State RI	Zip 02921	City Cranston	State RI	Zip [↓] 02921
Secretary Name Duane M. Laurie, Jr.			Treasurer Name Sandra M. Laurie		
Street Address 30 Starline Way			Street Address 30 Starline Way		
Cranston	State RI	Zip 02921	City State RI		Zip 02921
LIST <u>all</u> directors (N	AMES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT)		
Director Name Duane M. Laurie, Jr.			Director Name Josh Driver		
treet Address 30 Starline Way			Street Address 77 West Park Dr	rive	
ity Cranston	State RI	Zip 02921	City Providence	State RI	Zip 02908
irector Name	•		Director Name		
treet Address			Street Address	,	
ity	State	Zip	City	State	Zip
SHARES AUTHORIZED		I	10. SHARES ISSUED	("X" BOX FOR ATTACH	IMENT)
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
his information is currently of record in the Office of the Secretary of State. Changes require an additional filing. ee Section 9 of instruction sheet.			2,000	Common	No par value.
This report must be executed		corporation by an authorize st be executed on behalf of			of a receiver or trustee,
	and roport mo	or on execution on bendit of			m that I have examined
File Date			this report, includin	g any accompanying s	chedules and statements
Check No		FILED	and that all stateme	ints contained herein ar	e true and correct. $1/20$
By:			Signature of Authoria		Date

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