



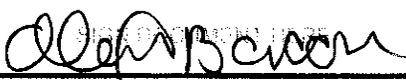
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017 - AMENDED Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

2017 MAR 31 AM 8:32

1. Entity ID Number 35041		2. Exact name of the Corporation H B Welding, Inc.				
3. Principal Office Address 60 Dyerville Avenue			City Johnston	State R.I.	Zip 02919	
4. NAICS Code 23 - Construction		6. Brief description of the character of business conducted in Rhode Island Welding				
5. State of Incorporation Rhode Island						
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
President Name Alexis Bacon			Vice-President Name			
Street Address 406 Lakeshore Drive			Street Address			
City Warwick	State R.I.	Zip 02889	City	State	Zip	
Secretary Name Alexis Bacon			Treasurer Name Alexis Bacon			
Street Address 406 Lakeshore Drive			Street Address 406 Lakeshore Drive			
City Warwick	State R.I.	Zip 02889	City Warwick	State R.I.	Zip 02889	
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
Director Name Alexis Bacon			Director Name			
Street Address 406 Lakeshore Drive			Street Address			
City Warwick	State R.I.	Zip 02889	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. Shares Authorized		10. Shares Issued				Check the box to indicate an attachment <input type="checkbox"/>
This information is currently of record in the Department of State. Changes require an additional filing...		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE	
		102		Common	No Par	
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 Alexis Bacon					Date March 31, 2017	
Signature of Authorized Representative 						

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

FILED

MAR 31 2017

BY *AK* 8:32



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

March 31, 2017 08:32 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

