State of Rhode Island and Providence Plantations Fee: \$50.00 Office of the Secretary of State						
Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040						
Business Corporation Annual Report Filing Period: January 1 - March	1					
In accordance with R.I.G.L. 7-1.2 annual report within thirty (30) da (c&d)) is subject to a penalty fee	ys after the time prescribed by					
ANNUAL REPORT YEAR: 201	<u>8</u>					
1. Corporate ID No. 0000	08519					
2. Name of Corporation Maxson Automatic Machinery Company						
3. Street Address Principal Bu	isiness Office:					
No. and Street:70 AIRPCity or Town:WESTER	PORT ROAD RLY State:]	<u>RI</u> Zip: <u>02891</u>	Country: <u>USA</u>			
4. Business Phone No.						
401-596-0162						
5. State of Incorporation						
State: <u>RI</u>						
	ARTICLE III					
Enter the six digit NAICS Code the list of codes here. More inform			by the entity. Download			
<u>339999</u>						
6. Brief Description of the Cha	aracter of Business Conducte	d in Rhode Island				
MANUFACTURER OF PAP EQUIPMENT	ER, FILM, AND FOIL SHE	ETING AND CON	VERTING			
7. Names and Addresses of th	e Officers and Directors:					
All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.						
Title	Individual Name	A	ddress			
	First, Middle, Last, Suffix	Address, City or Towr	n, State, Zip Code, Country			

JOSEPH F MATTHEWS

3103 POST ROAD

TREASURER

		WAKEFIELD, RI 02879 USA
PRESIDENT	JOSEPH F MATTHEWS	3103 POST ROAD
		WAKEFIELD, RI 02879- USA
SECRETARY	MICHAEL J TERRANOVA	2 DUCK POND TRAIL
		WESTERLY, RI 02879 USA
DIRECTOR	MICHAEL J TERRANOVA	2 DUCK POND TRAIL
		WESTERLY , RI 02879 USA
VICE PRESIDENT	MICHAEL J TERRANOVA	2 DUCK POND TRAIL
		WESTERLY, RI 02879 USA
DIRECTOR	JOSEPH F MATTHEWS	3103 POST ROAD
		WAKEFIELD, RI 02879 USA
DIRECTOR	LINDA B MATTHEWS	3103 POST ROAD
		WAKEFIELD, RI 02879 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CNP		\$0.0000	4,000.00	3000

9. 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.

Signed this 18 Day of January, 2018 at 9:47:24 AM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By ROBERT COUNTS

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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