



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 000170516		2. Exact name of the Corporation Caisson Construction Corporation												
3. Principal Office Address 91 Providence Hwy. (Ste. 107) 2nd Floor			City Westwood	State MA	Zip 02090									
4. NAICS Code 23 - Construction		6. Brief description of the character of business conducted in Rhode Island GENERAL CONTRACTOR, CONSTRUCTION MANAGEMENT FOR CONSTRUCTION												
5. State of Incorporation MASSACHUSETTS		238990												
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Bruce Jaffin			Vice-President Name None											
Street Address 179 Pine Street			Street Address											
City Medfield	State MA	Zip 02052	City	State	Zip									
Secretary Name Bruce Jaffin			Treasurer Name Bruce Jaffin											
Street Address 179 Pine Street			Street Address 179 Pine Street											
City Medfield	State MA	Zip 02052	City Medfield	State MA	Zip 02052									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Bruce Jaffin			Director Name None											
Street Address 179 Pine Street			Street Address											
City Medfield	State MA	Zip 02052	City	State	Zip									
Director Name None			Director Name None											
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.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>250,000</td> <td>Common</td> <td>2,500</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	250,000	Common	2,500			
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250,000	Common	2,500												
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 Bruce Jaffin, President				Date 1/5/18										
Signature of Authorized Representative 				SIGN DOCUMENT HERE FILED										

MAR 01 2018

BY 10332 DS FORM 630 - Revised: 10/2016