



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:

2018

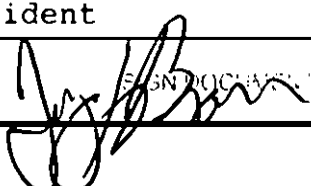
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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

RECEIVED
SECRETARY OF STATE
CORPORATE DIVISION
2018 MAY 29 PM 12:22

1. Entity ID Number 000151344		2. Exact name of the Corporation Structural Systems, Inc.	
3. Principal Office Address 865 Turnpike Street		City N Andover	State MA
4. NAICS Code 236116	6. Brief description of the character of business conducted in Rhode Island To provide steel framing on low rise commercial buildings		
5. State of Incorporation MA			
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☒			
President Name Jay H Brown		Vice-President Name Brian M Mitchell	
Street Address 17 Penniman Lane		Street Address 9 Lisa Lane	
City Hampton	State NH	Zip 03842	City Georgetown
			State MA
			Zip 01833
Secretary Name Jay H Brown		Treasurer Name Jay H Brown	
Street Address 17 Penniman Lane		Street Address 17 Penniman Lane	
City Hampton	State NH	Zip 03842	City Hampton
			State NH
			Zip 03842
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐			
Director Name Brian M Mitchell		Director Name Jay H Brown	
Street Address 9 Lisa Lane		Street Address 17 Penniman Lane	
City Georgetown	State MA	Zip 01833	City Hampton
			State NH
			Zip 03842
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 ☐	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES	
		CLASS/SERIES	
		PAR VALUE	
		12500	
		CNP	
		0	
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 Jay H Brown, President		Date May 24, 2018	
Signature of Authorized Representative 		FILED MAY 29 2018 BY 331483 12:24	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

FORM 630 - Revised: 10/2017

STRUCTURAL SYSTEMS, INC.

865 TURNPIKE STREET • NORTH ANDOVER, MASSACHUSETTS 01845.6139

phone 978.682.1000

fax 978.682.1004

Vice President

Joshua Reilly
10 Flora Street
Haverhill, MA 01830