



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

FILED

JAN 21 2020

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Annual Report for the year: 2020
 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 000089038	2. Exact name of the Corporation ATLAS FABRICATION INC.		
3. Principal Office Address 20 Providence Pike		City North Smithfield	State RI
		Zip 02896	
4. NAICS Code 339999	6. Brief description of the character of business conducted in Rhode Island TO Purchase and sell manufactured solid surface and hand wood products as well as composites.		
5. State of Incorporation RI			

7. List ALL officers (names and addresses)				Check the box to indicate an attachment <input type="checkbox"/>	
President Name KENNETH BECK		Vice-President Name			
Street Address 182 School Street		Street Address			
City REHOBOTH	State MA	Zip 02869	City	State	Zip
Secretary Name		Treasurer Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip

8. List ALL directors (names and addresses)				Check the box to indicate an attachment <input type="checkbox"/>	
Director Name KENNETH BECK		Director Name			
Street Address		Street Address			
City	State	Zip	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			
		100		100	

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 Kenneth Beck		Date 01/17/20
Signature of Authorized Representative 		SIGN DOCUMENT HERE