



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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

FILED

FEB 05 2021

BY

1. Entity ID Number 000506670		2. Exact name of the Corporation Solid Earth Technologies, Inc.		BY	
3. Principal Office Address 3 Howe Drive, Unit #3			City Amherst	State NH	Zip 03031
4. NAICS Code 238990		6. Brief description of the character of business conducted in Rhode Island Helical Pier and Boardwalk Installations			
5. State of Incorporation NEW HAMPSHIRE					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name MATTHEW STACY			Vice-President Name MATTHEW STACY		
Street Address 11 Windermere Road			Street Address 11 Windermere Road		
City Moultonborough	State NH	Zip 03254	City Moultonborough	State NH	Zip 03254
Secretary Name MATTHEW STACY			Treasurer Name MATTHEW STACY		
Street Address 11 Windermere Road			Street Address 11 Windermere Road		
City Moultonborough	State NH	Zip 03254	City Moultonborough	State NH	Zip 03254
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized					
This information is currently of record in the Department of State.					
Changes require an additional filing.					
10. Shares Issued Check the box to indicate an attachment ☐					
NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
100	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 MATTHEW STACY					Date 1-19-2021
Signature of Authorized Representative					

MAIL TO:

Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov