RI SOS Filing Number: 202564437960 Date: 2/5/2025 4:00:00 PM State of Rhode Island **Department of State - Business Services Division** Annual Report for the year: 2025 Corporation → Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31. 1. Entity ID Number 2. Exact name of the Corporation 000506670 Solid Earth Technologies, Inc. 3. Principal Office Address City State 03031 3 Howe Drive, Unit #3 NH Amherst 4. NAICS Code Brief description of the character of business conducted in Rhode Island 238990 Helical Pier and Boardwalk Installations 5. State of Incorporation **NEW HAMPSHIRE** Check the box to indicate an attachment List ALL officers (names and addresses) President Name MATTHEW STACY Vice-President Name MATTHEW STACY Street Address Street Address 65 Captain Bannon Circle 65 Captain Bannon Circle ^{Zip} 03054 State NH Merrimack Merrimack NH 03054 Treasurer Name MATTHEW STACY Secretary Name **MATTHEW STACY** Street Address Street Address 65 Captain Bannon Circle 65 Captain Bannon Circle Zip 03054 State NH Merrimack NH Merrimack 03054 8. List ALL directors (names and addresses) Check the box to indicate an attachment Director Name Director Name **NONE NONE** Street Address Street Address City State Zip City State Zip Director Name NONE Director Name NONE Street Address Street Address State City City State Shares Authorized 10. Shares Issued Check the box to indicate an attachment This information is currently of record in the NUMBER OF SHARES CLASS/SERIES Department of State. 100 **NO PAR** COMMON Changes require an additional filing. 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

Signature of Authorized Representative

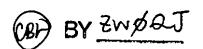
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MAIL TO:
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