



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

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 SECRETARY OF STATE
 CORPORATIONS DIVISION

Annual Report for the year: 2019
 Corporation

2019 MAR -8 PM 2:39

- 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 505616		2. Exact name of the Corporation JPT Computer Process Control Services, Inc.	
3. Principal Office Address 8 Belcourt Avenue		City North Providence	State RI
		Zip 02911	
4. NAICS Code 541519	6. Brief description of the character of business conducted in Rhode Island Provide automation services to manufacturing companies.		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name John Patrick Tallavico		Vice-President Name None	
Street Address 8 Belcourt Avenue		Street Address	
City North Providence	State RI	City	State
Zip 02911			
Secretary Name		Treasurer Name John Patrick Tallavico	
Street Address		Street Address Same	
City	State	City	State
Zip			
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name John Patrick Tallavico		Director Name None	
Street Address Same		Street Address	
City	State	City	State
Zip			
Director Name None		Director Name None	
Street Address		Street Address	
City	State	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
		100	0.01
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 John Patrick Tallavico			Date 08 March 2019
Signature of Authorized Representative <i>John Patrick Tallavico</i>			FILED

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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