



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3000

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2006

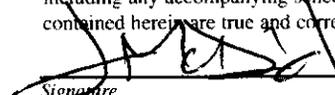
Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 139397		2. Name of Corporation JFM Enterprises, Inc.			
3. Street Address Principal Business Office 1500 Hope Road			City Hope	State RI	Zip 02831
4. Business Phone No. 401-821-2255		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name James F. McDonald IV			Vice President Name none		
Street Address 1500 Hope Road			Street Address		
City Hope	State RI	Zip 02831	City	State	Zip
Secretary Name James F. McDonald IV			Treasurer Name Gina McDonald		
Street Address 1500 Hope Road			Street Address 1500 Hope Road		
City Hope	State RI	Zip 02831	City Hope	State RI	Zip 02831
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
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 ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000	common	no par value	100	common	no par value

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.

File Date	FILED
Check No.	OCT 09 2007
By:	2037
FOR SECRETARY OF STATE USE ONLY	

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.


Signature _____ Date **9/1/07**
James F McDonald IV
Print or Type Name
President
Title