RI SOS Filing Number: 200808954680 Date: 02/19/2008 4:00 PM

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
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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.	2. Name of Corporation			
129686	JALPROV, INC.			
3. Street Address Principal Business Office		City	State	Zip
C/O JASON A. LIMA, 84 LINDEN ROAD		SEEKONK	MA	02771
4. Business Phone No.	5. State of Incorporation			
	RHODE ISLAND			

6. Brief Description of the Character of Business Conducted in Rhode Island
TO ENGAGE IN THE SALE OF COMPUTER PRODUCTS AND ALL RELATED CONSULTING SERVICES

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
JASON A. LIMA					
Street Address			Street Address		
84 LINDEN ROAD					
City	State	Zip	City	State	Zip
SEEKONK	MA	02771			
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
JASON A. LIMA					
Street Address			Street Address		
84 LINDEN ROAD					
City	State	Zip	City	State	Zip
SEEKONK	MA	02771			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1000		$1.00 PAR VALUE

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
1000		$1.00 PAR VALU

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.

[redacted]

[redacted]

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.

2/6/08
Signature *Date*

JASON A. LIMA
Print or Type Name

[redacted] PRESIDENT
Title

Form 630 Rev. 12/06

File Date FILED
Check No. FEB 19 2008
By: By DS - 1714
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