



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 2009

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. 40326		2. Name of Corporation JAROB ENTERPRISES, LTD.			
3. Street Address Principal Business Office C/O JAWHARJIAN LAW OFFICES, LLC		City JOHNSTON		State RI	Zip 02919
4. Business Phone No. (401) 383-1244		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ANN BLANCHETTE			Vice President Name ROBERT G. BLANCHETTE		
Street Address 10 THAYER STREET			Street Address 10 THAYER STREET		
City UPTON	State MA	Zip 01568	City UPTON	State MA	Zip 01568
Secretary Name ROBERT G. BLANCHETTE			Treasurer Name ANN BLANCHETTE		
Street Address 10 THAYER STREET			Street Address 10 THAYER STREET		
City UPTON	State MA	Zip 01568	City UPTON	State MA	Zip 01568
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ROBERT G. BLANCHETTE			Director Name		
Street Address 10 THAYER STREET			Street Address		
City UPTON	State MA	Zip 01568	City	State	Zip
Director Name ANN BLANCHETTE			Director Name		
Street Address 10 THAYER STREET			Street Address		
City UPTON	State MA	Zip 01568	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 100	Class/Series COMMON	Par Value 0

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.	FEB 18 2009
By:	1384
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.

Ann Blanchette 2/10/09
Signature Date
ANN BLANCHETTE
Print or Type Name
PRESIDENT
Title