

FOR SECRETARY OF STATE USE ONLY

A. Ralpb Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

4

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(c) each corporation failing or referring to file in comment within this (20) Jan. 6 and with 18 (20) Ja

1. Corporate 1D No. 23462	2. Name of Cor J ENTERP	2. Name of Corporation J ENTERPRISES, INC.				
3. Street Address Principal Business Office 155 TAUNTON AVENUE			City EAST PROVIDENCE	State CE RI	7ip 02914	
		5. State of Incorporation MASSACHUSET			02314	
Brief Description of the Char	racter of Business Condu	cted in Rhode Island OLINE				
	SSES OF THE OFF	CERS: ("X" BOX FOR ATTA	CHMENT) T FILL IN  Vice President Name  PAUL SROCZYNS		G ATTACHMENTS	
Street Address PSC 812 BOX 3560			Street Address PSC 812 BOX 3560			
ily PO	State AE	<sup>Zip</sup> 09627-3560	City FPO	State AE	<sup>Zip</sup> 09627-3560	
Secretary Name PAUL SROCZYNSKI			Treasurer Name PAUL SCROCZYNSKI			
PSC 812 BOX 3560			Street Address PSC 812 BOX 3560			
City FPO	State <b>AE</b>	<sup>Zip</sup> 09627-3560	City FPO	State AE	<i>Zip</i> 09627-3560	
. NAMES AND ADDRES Director Name PAUL SROCZYNSKI		CTORS: ("X" BOX FOR AT	TACHMENT)  FILL I Director Name		NG ATTACHMENTS	
treet Address PSC 812 BOX 3560			Street Address			
ary FPO	State AE	<sup>Zip</sup> 09627-3560	City	State	Zip	
lirector Name	***************************************		Director Name			
treet Address			Street Address			
ity	State	Zip	City	State	Zip	
. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
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.			Number of Shares	Class/Series	Par Value	
			50	A/A	NO PAR	
his report must be executis report must be execu	uted on behalf of th ted on behalf of the	e corporation by an authorize corporation by the receiver of	d representative. If the or trustee.	corporation is in the hand	ds of a receiver or trust	
FIL	.ED		including any acc	perjury, I declare and affirm ompanying schedules and si are true and correct.	that I have examined this tatements, and that all state	
FEB 01 2010 3v 299769			Signature Date PAUL SROCZYNSKI			
			Print or Type Name PRESIDEN	e		

Title