STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
***Matthew A. Brown,** Secretary of State*

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
113420	J. Roukous, Inc.			
3. Street Address Principal Business Office		City	State	Zip
23 THEODORE FOSTER Rd.		N. Scituate	RI	02857
4. Business Phone No.	5. State of Incorporation			6. SIC Code
401-647-7495	RHODE ISLAND			

7. Brief Description of the Character of Business Conducted in Rhode Island
TO CONDUCT A CONSTRUCTION BUSINESS

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

President Name	Street Address	City	State	Zip
JOSEPH ROUKOUS	23 THEODORE FOSTER Rd	N. Scituate	RI	02857

Vice President Name	Street Address	City	State	Zip
FRANCES ROUKOUS	23 THEODORE FOSTER Rd	N. Scituate	RI	02857

Secretary Name	Street Address	City	State	Zip
FRANCES ROUKOUS	23 THEODORE FOSTER Rd	N. Scituate	RI	02857

Treasurer Name	Street Address	City	State	Zip
JOSEPH ROUKOUS	23 THEODORE FOSTER Rd	N. Scituate	RI	02857

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

Director Name	Street Address	City	State	Zip
JOSEPH ROUKOUS	23 THEODORE FOSTER Rd	N. Scituate	RI	02857

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip
FRANCES ROUKOUS	23 THEODORE FOSTER Rd	N. Scituate	RI	02857

Director Name	Street Address	City	State	Zip

10. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐ **11. SHARES ISSUED** ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	*Class/Series*	*Par Value*	*Number of Shares*	*Class/Series*	*Par Value*
1,000	COMM	NO PAR VALUE	200	Common	NO PAR

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted]

113420

File Date 2-23-04
Check No. 1041
By: ICP

FOR SECRETARY OF STATE USE ONLY

[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.

Frances Roukous 2/18/04
Signature of Officer *Date*

FRANCES ROUKOUS
Print or Type Name of Officer

V. P.
Title of Officer

[redacted]

Form 630 Rev. 12/03