RI SOS Filing Number: 201174077890 Date: 01/26/2011 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 2011

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
143453	J. MOURAO, INC

3. Street Address Principal Business Office	City	State	Zip
57 Appleton Ave	Pawtucket	RI	02860

4. Business Phone No.	5. State of Incorporation
	RHODE ISLAND

6. Brief Description of the Character of Business Conducted in Rhode Island

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

President Name	Vice President Name
JOHN MOURAO	John Mourao
Street Address: 1 MEDBERRY LANE	Street Address: 1 Medberry Lane
City: REHOBOTH · State: MASSACHUSE · Zip: 02769	City: Rehoboth · State: MA · Zip: 02769
Secretary Name	**Treasurer Name**
John Mourao	John Mourao
Street Address: 1 Medberry Lane	Street Address: 1 Medberry Lane
City: Rehoboth · State: MA · Zip: 02769	City: Rehoboth · State: MA · Zip: 02769

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

Director Name	Director Name
JOHN MOURAO	
Street Address: 1 MEDBERRY LANE	Street Address:
City: REHOBOTH · State: MASSACHUSET · Zip: 02769	City · State · Zip
Director Name	**Director Name**
Street Address	Street Address
City · State · Zip	City · State · Zip

RECEIVED
2011 JAN 26 AM 10:46
SECRETARY OF STATE
CORPORATIONS DIV

9. SHARES AUTHORIZED

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.

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
1000	COMMON	NO PAR

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] **FILED**

File Date: JAN 26 2011

Check No.: BY 4494

By:

FOR SECRETARY OF STATE USE ONLY

57436-26-586340

[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.

Signature — Date

JOHN MOURAO
Print or Type Name

[redacted] PRESIDENT
Title

Form 630 Rev. 08/08