

FOR SECRETARY OF STATE USE ONLY

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

Providence, RI 02904-2615 401.222,3040

Form 630 Rev. 08/08

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

564469	J. Joubert	2. Name of Corporation J. Joubert Builders, Inc.				
Sireer Address Principal Business Office 431 Boston Neck Road		City North Kingstown	State RI	^{Zip} 02874		
4. Business Phone No 5. State of Incorporation 401-742-1162 Rhode Island						
 Brief Description of the Chara to engage in and carry of 	cter of Business Conductor a general contra	cted in Rhode Island acting and property manage	ement business			
. NAMES AND ADDRES	SES OF THE OFFI	CERS: ("X" BOX FOR ATT	ACHMENT) 📋 FILL IN SP	ACES BEFORE USING	G ATTACHMENTS	
President Name Jason S. Joubert			Vice President Name	•		
Troet Address	·		None			
431 Boston Neck Ro	ad		Street Address			
in North Kingstown	State RI	⁷ φ 02874	CII) [.]	State	Zip	
ecretary Name ason S. Joubert	*********************	·····	Treasurer Name Jason S. Joubert		······································	
Street Address 1431 Boston Neck Road			Street Address 1431 Boston Neck Road			
iy North Kingstown	State RI	^{Zip} 02874	City North Kingstown	State Ri	<i>Zip</i> 02874	
. NAMES AND ADDRESS	SES OF THE DIRE	CTORS: ("X" BOX FOR AT	TACHMENT) [FILL IN S	PACES BEFORE USI	NG ATTACHMENTS	
Orector Name None			Director Name None			
treet Address			: NOTIE : Street Address			
			Siree Alanesa			
ity.	State	Zip	City	State	ZΨ	
irector Name			Director Name			
None			None			
reet Address			Street Address			
()·	State	Zip	City	State	Zip	
					-	
SHARES AUTHORIZED			10. SHARES ISSUED (
			ISSUED SHARES — THIS SECTI	ON <u>MUST</u> 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	
			1000	common	\$1 par value	
nis report must be execut	ed on behalf of the	corporation by an authorize	ed representative. If the corr	poration is in the hand	s of a receiver or to	
is report must be execute	d on behalf of the	corporation by the receiver	or trustee.	The state of the s	of a receiver of the	
			Under penalty of perju	ary, I declare and affirm	that I have examined th	
· Pit Pi			oncluding any accomp	anying schedules and sta	atements, and that all st	
le Date FILE	<u></u>		Janu &	-bubis	7 2/25	
			/ <u> </u>		\sim ϕ 100	
FED 4 4	9011		Signature		Date	
heck No. FEB 2 8	2011	_	Jason S. Jou	ubert	Date	

President