

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(e)dd) is

subject to a penalty fee of \$	\$25.00.				
1. Corporate ID No.	2. Name of Corporati	on W.J.II W	al Works Co		
14888 3. Street Address Principal	Business Office		City	State	Zip
33 4. Business Phone No.	O Victor Road S	5. State of Incorporation	AHleboro	Ma	02703
	8-226-0136	5. state of incorporation	Ma		
6. Brief Description of the	Character of Business Conducted i.	Rhode Island	ental Hetal	D.J.	···
7. NAMES AND ADI	PRESSES OF THE OFFICER			- · ·	ATTACHMENTS
President Name			Vice President Name		
George Martell Street Address			George Martell Street Address		
330 Victor Road Suite A			Street Address 330 Victor Road Suite A City State Zip		
AHLEboro	siate Ha	02703	A Hleboro	State Ha	02703
George Martell			George Martell		
Street Address 330	Victor Road	Suite A	Street Address	lictor Road	Suite A
AHlebor	State	^{zip} 02703	Attleboro	State Ma	^{zip} 02703
8. NAMES AND ADD Director Name	PRESSES OF THE DIRECTO	ORS: ("X" BOX FOR ATT	FACHMENT) TILL IN S Director Name	SPACES BEFORE USIN	G ATTACHMENTS
none			поне		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
None Street Address		Street Address			
City	State	Zip	City	State	Zip
9. SHARES AUTHOR	RIZED	l	10. SHARES ISSUED (, <u> </u>
This information is approach of record in the Office of the Section of			ISSUED SHARES — THIS SECT Number of Shares	Class/Series	Par Value
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.			поче		
This report must be e	executed on behalf of the co	rporation by an authorize	ed representative. If the con	rporation is in the hand	ls of a receiver or trustee.
this report must be e	xecuted on behalf of the con	poration by the receiver	or trustee.		
	FILED		Under penalty of per	rjury, I declare and affirm	that I have examined this report
		\neg	including any accom		atements, and that all statement
File Date	AR 08 2011		of surf	MA	3/7/11
5	mnc)		Signapire		Bate
Check No. By	4101		George	Mortel	· · · · · · · · · · · · · · · · · · ·
Ву:	7101	_	Print or Type Name	1 - F	
FOR SECRETA	RY OF STATE USE ONLY	•	Title	in	