



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Business Corporation  
Annual Report - Amended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

**This form is only to be used to amend the current annual report on file with this office.**

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000799205

2. Name of Corporation JMS PIZZERIA, INC

3. Street Address Principal Business Office:

No. and Street: 269 VALLEY STREET  
City or Town: PROVIDENCE

State: RI Zip: 02908 Country: USA

4. Business Phone No.

401-862-9489

5. State of Incorporation

State: RI

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

PIZZA

7. Names and Addresses of the Officers and Directors:

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.**

| Title          | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|----------------|------------------------------------------------|------------------------------------------------------------|
| PRESIDENT      | SHABAN ASGHAR                                  | 42 FAIRVIEW AVENUE<br>CUMBERLAND, RI 02864 USA             |
| TREASURER      | SHABAN ASGHAR                                  | 42 FAIRVIEW AVENUE<br>CUMBERLAND, RI 02864 USA             |
| VICE PRESIDENT | MUQUDAS RAZA                                   | 60 RICHIE ROAD<br>ATTLEBORO, MA 02760 USA                  |
| SECRETARY      | JUNAID CHEEMA                                  | 104 GREENBRIER DRIVE<br>SEEKONK, MA 02771 USA              |

**8. Shares Authorized and Issued**

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized<br>Shares<br><i>Number of Shares</i> | Total Issued<br>and<br>Outstanding<br><i>Num of<br/>Shares</i> |
|----------------|-----------------|---------------------|-------------------------------------------------------|----------------------------------------------------------------|
| CNP            |                 | \$0.0000            | 1,000.00                                              | 1000                                                           |

**9. 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.**

**Signed this 6 Day of April, 2015 at 11:45:45 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By SHABAN ASGHAR

Signature of Authorized Representative of the Corporation

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.**

Form No. 630  
Revised 09/07

© 2007 - 2015 State of Rhode Island and Providence Plantations  
All Rights Reserved



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

Nellie M. Gorbea  
*Secretary of State*

