



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

111800

2. Name of Corporation

S & J INSULATION CO., INC.

3. Street Address Principal Business Office

676 Weaver Hill Rd

City

Coventry

State

RI

Zip

02816

4. Business Phone No.

5. State of Incorporation

RHODE ISLAND

6. SIC Code

885

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

Insulation of Heating & Refrigeration

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Gerald J. Peloso

Vice President Name

Patti Ann Kenny

Street Address

676 Weaver Hill Rd

Street Address

79 Indian Run Trail

City

Coventry

State

RI

Zip

02816

City

Kingstown

State

RI

Zip

02879

Secretary Name

Pamela Peloso

Treasurer Name

Gerald Peloso

Street Address

676 Weaver Hill Rd

Street Address

676 Weaver Hill Rd

City

Coventry

State

RI

Zip

02816

City

Coventry

State

RI

Zip

02816

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

none

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

2,000 \$1.00 PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

none

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



* 1 1 1 8 0 0 *

File Date:

2/12/03

Check No.:

1805

By:

FOR SECRETARY OF STATE USE ONLY

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.

Pamela S. Peloso

Signature of Officer

Date

1/19/03

Pamela S. Peloso

Print or Type Name of Officer

Title of Officer

5

Secretary