



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

A. Ralph Mullis, Secretary of State
Corporations Division
118 W. River Street
Providence, RI 02904-2615
401.222.3600

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

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)(1)) is subject to a penalty fee of \$25.00.

1. Corporation ID No. 1336239		2. Name of Corporation Triple J Drywall and Carpentry, Inc.		
3. Mailing Address (Principal Business Office) 100 Royal Little Drive		City Providence	State RI	Zip 02904
4. Telephone (Home No.) (401) 331-2277		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Interior and Exterior Construction Servicing. Construction Management.				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("V" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Luis Mendez-Barajas		Vice President Name James L. Carr, III		
Street Address 100 Royal Little Drive		Street Address 100 Royal Little Drive		
City Providence	State RI	Zip 02904	City Providence	State RI
Secretary Name Mary Anne Wood		Treasurer Name Mary Anne Wood		
Street Address 8 Timber Ledge Drive		Street Address 8 Timber Ledge Drive		
City Holliston	State MA	Zip 01746	City Holliston	State MA
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Luis Mendez-Barajas		Director Name James L. Carr, III		
Street Address 100 Royal Little Drive		Street Address 100 Royal Little Drive		
City Providence	State RI	Zip 02904	City Providence	State RI
Director Name None		Director Name None		
Street Address		Street Address		
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.		ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
		Number of Shares 100	Class or Series Common	Par Value 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.

File Date _____
Checked by _____ BY 11378 DS
By _____
FOR SECRETARY OF STATE USE ONLY

FILED
APR 01 2016

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: 3/24/2016
Print or Type Name: Luis Mendez-Barajas
Title: President