



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

2016

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000911683		2. Exact name of the Corporation A & J Environmental Inc			
3. Principal office address 66 Winterberry Dr		City Tiverton	State RI	Zip 02878	
4. Business Phone No. 401-862-5182		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island mold & asbestos remediation					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Andrew Connelly			Vice-President Name Jared Nientimp		
Street Address 66 Winterberry Dr			Street Address 39 Winterberry Dr		
City Tiverton	State RI	Zip 02878	City Tiverton	State RI	Zip 02878
Secretary Name Jared Nientimp			Treasurer Name Andrew Connelly		
Street Address 39 Winterberry Dr			Street Address 66 Winterberry Dr		
City Tiverton	State RI	Zip 02878	City Tiverton	State RI	Zip 02878
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Andrew Connelly			Director Name Jared Nientimp		
Street Address 66 Winterberry Dr			Street Address 39 Winterberry Dr		
City Tiverton	State RI	Zip 02878	City Tiverton	State RI	Zip 02878
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	STK	0.0100

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 _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Form No. 630
Revised: 01/2012

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.

10:34 AM

FILED

APR 11 2016

By 272017

Signature of Authorized Representative
Andrew Connelly

4/6/2016

Date

Print or Type Name of Authorized Representative

KM