

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

(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: 2017

- **1. Corporate ID No.** 001668799
- 2. Name of Corporation JRCFU, Inc.
- 3. Street Address Principal Business Office:

No. and Street: 678 AQUIDNECK AVENUE

City or Town: MIDDLETOWN State: RI Zip: 02842 Country: USA

- 4. Business Phone No.
- 5. State of Incorporation

State: RI

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

72

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

RESTAURANT

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOANNA REVES	PO BOX 1139 N. KINGSTOWN, RI 02852 USA
TREASURER	JOANNA REVES	PO BOX 1139 N. KINGSTOWN, RI 02852 USA

SECRETARY	JOANNA REVES	PO BOX 1139 N. KINGSTOWN, RI 02852 USA
DIRECTOR	JOANNA REVES	PO BOX 1139 N. KINGSTOWN, RI 02852 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
CNP		\$0.0000	1,000.00	100

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 4 Day of January, 2017 at 9:47:55 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 JOANNA REVES

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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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

Tullin U. Horler

