



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

A. Ralph Molis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2017**

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. 7-1.2-1981(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. 7-1.2-1981(c)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 93682		2. Name of Corporation J.G TRUCKING INC	
3. Street Address Principal Business Office 314 MAGNOLIA ST			City CRANSTON
4. Business Phone No. 401-461-6142		5. State of Incorporation RI	
6. Brief Description of the Character of Business Conducted in Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name JOSE M GOMES		Vice President Name MARIA F GOMES	
Street Address 314 MAGNOLIA ST		Street Address 314 MAGNOLIA ST	
City CRANSTON	State RI	City CRANSTON	State RI
Zip 02910		Zip 02910	
Secretary Name JOSE M. GOMES		Treasurer Name JOSE M. GOMES	
Street Address 314 MAGNOLIA ST		Street Address 314 MAGNOLIA ST	
City CRANSTON	State RI	City CRANSTON	State RI
Zip 02910		Zip 02910	
8. NAMES AND ADDRESSES OF THE DIRECTORS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name JOSE M GOMES		Director Name	
Street Address 314 MAGNOLIA ST		Street Address	
City CRANSTON	State RI	City	State
Zip 02910		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		10. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>	
AUTHORIZED SHARES		ISSUED SHARES — THIS SECTION MUST BE COMPLETED	
Number of Shares	Class/Series	Par Value	
1,000	NO PAR VALUE		
Number of Shares	Class/Series	Par Value	
100	COMMON	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.

**FILED**

JAN 23 2017

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: JOSE M. GOMES Date: 1/18/17

Print or Type Name: JOSE M GOMES

Title: PRES.

File Date: \_\_\_\_\_ BY: \_\_\_\_\_  
Check No. \_\_\_\_\_  
By: \_\_\_\_\_  
FOR SECRETARY OF STATE USE ONLY