

State of Rhode Island and Providence Plantations

Department of State - Business Services Division


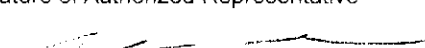
Annual Report for the year: **2017**

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 312852		2. Exact name of the Corporation AJD Service Awards, Inc.			
3. Principal Office Address 1 East Street		City Riverside		State RI	Zip 02915
4. NAICS Code 31-33 - Manufacturing	6. Brief description of the character of business conducted in Rhode Island Manufacturing of emblamation and specialty jewelry.				
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Scott E. Case			Vice-President Name Same		
Street Address 18 Maple Avenue			Street Address		
City Riverside	State RI	Zip 02915	City	State	Zip
Secretary Name Same as above			Treasurer Name Same		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Same as above			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
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>					
This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued		
			NUMBER OF SHARES 1000	CLASS/SERIES Common	PAR VALUE NPV
11. 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. 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.					
Name of Authorized Representative 				Date 1-27-17	
Signature of Authorized Representative 					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FEB 13 2017

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