



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.

 RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

2017 MAR 27 PM 1:36

1. Entity ID Number 799357		2. Exact name of the Corporation N.J.I., Inc.												
3. Principal Office Address 4 Hope Furnace Road			City Hope	State RI	Zip 02831									
4. NAICS Code 72 - Accommodation and Food		6. Brief description of the character of business conducted in Rhode Island Retail sale of pizza, calzones, sandwiches, prepared foods and beverages.												
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 Nicholas J. Izzi			Vice-President Name Nicholas J. Izzi											
Street Address 152 Burnt Hill Road			Street Address 152 Burnt Hill Road											
City Hope	State RI	Zip 02831	City Hope	State RI	Zip 02831									
Secretary Name Nicholas J. Izzi			Treasurer Name Nicholas J. Izzi											
Street Address 152 Burnt Hill Road			Street Address 152 Burnt Hill Road											
City Hope	State RI	Zip 02831	City Hope	State RI	Zip 02831									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name			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 This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>												
		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>500</td> <td>Common</td> <td>No Par</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	500	Common	No Par			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE												
500	Common	No Par												
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 Nicholas J. Izzi				Date 3/27/17										
Signature of Authorized Representative 				FILED MAR 27 2017 BY <u>CN 299282</u>										