



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: Amended 2016
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 891173		2. Exact name of the Corporation J&R Construction, Inc.	
3. Principal Office Address 10 Miss Fry Drive		City East Greenwich	State RI
		Zip 02818	
4. NAICS Code 23 - Construction	6. Brief description of the character of business conducted in Rhode Island General construction, acquire, renovate, operate, rent, develop, and sell real estate.		
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 John A. Furtado Jr.		Vice-President Name Rosanna Furtado	
Street Address 10 Miss Fry Drive		Street Address 10 Miss Fry Drive	
City East Greenwich	State RI	City East Greenwich	State RI
Zip 02818		Zip 02818	
Secretary Name John A. Furtado Jr.		Treasurer Name Rosanna Furtado	
Street Address 10 Miss Fry Drive		Street Address 10 Miss Fry Drive	
City East Greenwich	State RI	City East Greenwich	State RI
Zip 02818		Zip 02818	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name NONE		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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"/>	
		NUMBER OF SHARES 2,000	CLASS/SERIES Common
		PAR VALUE No par value	
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 Rosanna Furtado		Date 6/5/17	
Signature of Authorized Representative Rosanna Furtado			

FILED

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

10:25 JUN 07 2017

BY

FORM 630 - Revised: 02/2017