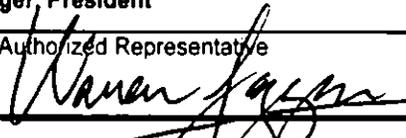




State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2018
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 22948		2. Exact name of the Corporation Warren Jagger Photography, Inc.			
3. Principal Office Address PO Box 603330			City Providence	State RI	Zip 02906
4. NAICS Code 541922		6. Brief description of the character of business conducted in Rhode Island Photography			
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 Warren Jagger			Vice-President Name Janet Jagger		
Street Address PO Box 603330			Street Address PO Box 603330		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Janet Jagger			Treasurer Name Warren Jagger		
Street Address PO Box 603330			Street Address PO Box 603330		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
8. List ALL directors (names and addresses) Check the box to indicate an attachment: <input type="checkbox"/>					
Director Name Warren Jagger			Director Name Janet Jagger		
Street Address PO Box 603330			Street Address PO Box 603330		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued 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.			NUMBER OF SHARES		CLASS/SERIES
			100	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 Warren Jagger, President				Date 2/8/2018	
Signature of Authorized Representative 			SIGN DOCUMENT HERE FILED <i>02</i>		

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 20 2018
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