



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

512113

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 118925		2. Exact name of the Corporation JR Partners, Inc.			
3. Principal Office Address One Richmond Square, Suite 225W			City Providence	State RI	Zip 02906
4. NAICS Code 999999		6. Brief description of the character of business conducted in Rhode Island Asset management.			
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 Joseph R. Wein			Vice-President Name None		
Street Address One Richmond Square, Suite 225W			Street Address		
City Providence	State RI	Zip 02906	City	State	Zip
Secretary Name Joseph R. Wein			Treasurer Name Joseph R. Wein		
Street Address One Richmond Square, Suite 225W			Street Address One Richmond Square, Suite 225W		
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 None			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			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
			PAR VALUE		\$1.00 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. <i>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.</i>					
Name of Authorized Representative Joseph R. Wein					Date 2/15/18
Signature of Authorized Representative					

FILED

SIGN DOCUMENT HERE

FEB 23 2018

BY **325054**
A.A.

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