



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

**Annual Report for the year:** 2018  
**Corporation**

**FILED**  
 MAR 02 2018 *[Signature]*  
 BY 19817

- 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 23562		2. Exact name of the Corporation Jay Packaging Group, Inc.			
3. Principal Office Address 100 Warwick Industrial Drive			City Warwick	State RI	Zip 02886
4. NAICS Code 323111		6. Brief description of the character of business conducted in Rhode Island Offset Printing & Thermoforming			
5. State of Incorporation Delaware					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Richard E. Kelly			Vice-President Name Fernando A. Lemos		
Street Address 100 Warwick Industrial Drive			Street Address 100 Warwick Industrial Drive		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Richard E. Kelly			Director Name Fernando A. Lemos		
Street Address 100 Warwick Industrial Drive			Street Address 100 Warwick Industrial Drive		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		1000		COMM	
				\$1.00	
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 <i>Fernando A. Lemos</i>				Date 2/28/17	
Signature of Authorized Representative <i>[Signature]</i>				SIGN DOCUMENT HERE	