



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 STATE SECRETARY OF STATE CORPORATION DIVISION
 2018 DEC 19 AM 11:13
 STAMP
 DEPARTMENT OF STATE

1. Entity ID Number 000058749		2. Exact name of the Corporation SJS, Inc.	
3. Principal Office Address P.O. Box 319		City Bristol	State RI
		Zip 02809	
4. NAICS Code 541910	6. Brief description of the character of business conducted in Rhode Island Business Consulting		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Ira C. Magaziner		Vice-President Name None	
Street Address 184 Poppaquash Road		Street Address	
City Bristol	State RI	Zip 02809	
Secretary Name None		Treasurer Name None	
Street Address		Street Address	
City	State	Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name None		Director Name None	
Street Address		Street Address	
City	State	Zip	
Director Name None		Director Name None	
Street Address		Street Address	
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"/>			
NUMBER OF SHARES		CLASS	PAR VALUE
100	CNP	0	
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 Ira C. Magaziner		Date 12/8/17	
Signature of Authorized Representative <i>Ira C. Magaziner</i>		SIGN DOCUMENT HERE	

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 20 JAN 18 AM 9:44
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 20 FEB 18 2
 RECEIVED SECRETARY OF STATE CORPORATION DIVISION
 2018 MAR 10 AM 10:27

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

FILED

MAR 19 2018

BY 326896
 A.A. 10:30 A.M.