

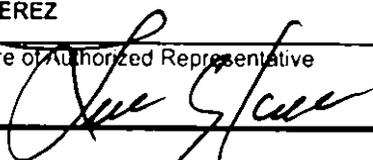
RECEIVED  
 SECRETARY OF STATE  
 CORPORATIONS DIV  
 2018 MAY -3 PM 1:44



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 <b>000797772</b>		2. Exact name of the Corporation <b>JR ELECTRONICS INC</b>			
3. Principal Office Address <b>516 CRANSTON ST</b>			City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02907</b>
4. NAICS Code <b>443142</b>		6. Brief description of the character of business conducted in Rhode Island <b>ENGAGE IN THE BUSINESS OF SELLING, REPAIR PHONES, INSTALL CAR ALARM SYSTEM.</b>			
5. State of Incorporation <b>RHODE ISLAND</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>LUIS JEREZ</b>			Vice-President Name <b>N/A</b>		
Street Address <b>231 UNION AVENUE</b>			Street Address		
City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02909</b>	City	State	Zip
Secretary Name <b>N/A</b>			Treasurer Name <b>N/A</b>		
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 <b>LUIS JEREZ</b>			Director Name <b>N/A</b>		
Street Address <b>231 UNION AVENUE</b>			Street Address		
City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02909</b>	City	State	Zip
Director Name <b>N/A</b>			Director Name <b>N/A</b>		
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
			PAR VALUE		
			<b>1000</b>	<b>COMMON</b>	<b>0.0100</b>
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 <b>LUIS JEREZ</b>				Date <b>04/23/2018</b>	
Signature of Authorized Representative 			<b>FILED</b>		

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

**MAY 03 2018**

BY HL C 24887558  
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