



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

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CORPORATIONS DIV
2018 MAY -3 PM 1:44

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 000797772		2. Exact name of the Corporation JR ELECTRONICS INC												
3. Principal Office Address 516 CRANSTON ST			City PROVIDENCE	State RI	Zip 02907									
4. NAICS Code 443142		6. Brief description of the character of business conducted in Rhode Island ENGAGE IN THE BUSINESS OF SELLING, REPAIR PHONES, INSTALL CAR ALARM SYSTEM.												
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 LUIS JEREZ			Vice-President Name N/A											
Street Address 231 UNION AVENUE			Street Address											
City PROVIDENCE	State RI	Zip 02909	City	State	Zip									
Secretary Name N/A			Treasurer Name N/A											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name LUIS JEREZ			Director Name N/A											
Street Address 231 UNION AVENUE			Street Address											
City PROVIDENCE	State RI	Zip 02909	City	State	Zip									
Director Name N/A			Director Name N/A											
Street Address			Street Address											
City	State	Zip	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"/>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>1000</td> <td>COMMON</td> <td>0.0100</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	1000	COMMON	0.0100			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE												
1000	COMMON	0.0100												
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 LUIS JEREZ				Date 04/23/2018										
Signature of Authorized Representative														

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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FORM 630 - Revised: 10/2017