

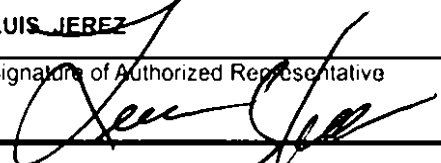


State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

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  
SECRETARY OF STATE  
CORPORATIONS DIV.  
2018 MAY -3 PM 1:14

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.					
<b>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.</b>					
Name of Authorized Representative <b>LUIS JEREZ</b>					Date <b>04/23/2018</b>
Signature of Authorized Representative 					

**FILED**  
SIGN DOCUMENT HERE

MAY 03 2018

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

BY **16LC 24887558**  
**1:45**

FORM 630 - Revised: 10/2017