



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

FILED STAMP

MAR 11 2019

FOR SECRETARY OF STATE
 DEPARTMENT OF STATE
 PROVIDENCE, RI

BY 1401 DS

Annual Report for the year: 2019 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 1666923 | | 2. Exact name of the Corporation JET SET, INC | | | |
| 3. Principal Office Address 1095 EDDY STREET | | | City PROVIDENCE | State RI | Zip 02905 |
| 4. NAICS Code 122511 81 - Other Services (except Put | | 6. Brief description of the character of business conducted in Rhode Island TO OPERATE RESTAURANT AND LOUNGES | | | |
| 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 JESUS TITIN | | | Vice-President Name YINERKIS CONTRERAS | | |
| Street Address 1070 BROAD STREET | | | Street Address 1070 BROAD STREET | | |
| City PROVIDENCE | State RI | Zip 02905 | City PROVIDENCE | State RI | Zip 02905 |
| Secretary Name JESUS TITIN | | | Treasurer Name JESUS TITIN | | |
| Street Address 1070 BROAD STREET | | | Street Address 1070 BROAD STREET | | |
| City PROVIDENCE | State RI | Zip 02905 | City PROVIDENCE | State RI | Zip 02905 |
| 8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| Director Name JESUS TITIN | | | Director Name | | |
| Street Address 1070 BROAD STREET | | | Street Address | | |
| City PROVIDENCE | State RI | Zip 02905 | City | State | Zip |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 9. Shares Authorized | | 10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/> | | | |
| This information is currently of record in the Department of State. Changes require an additional filing. | | NUMBER OF SHARES | | CLASS/SERIES | PAR VALUE |
| | | 10,000.00 | | CNP | \$0.0000 |
| 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 JESUS TITIN <i>Jesus M Titin</i> | | | | Date 02/13/2019 | |
| SIGN DOCUMENT HERE | | | | | |