RI SOS Filing	y Number: 2	202033711380	Date: 2/3	/2020 4:00:00 P	M		
State of Rhode Island and			Divinian				
Department of Sta	•	ss Services i	DIVISION		FIL	EN	
nnual Report for the year: 2020				FEB 0 3 2020 D			
orporation → Filing period: January 1 - March 1					LER N	3 2020 D	
→ Filing Fee. \$50.00				γc	76	a	
→ Penalty Additional \$25.00 fe		<u> </u>		`			
Entity ID Number 69808	2 Exact name of the Corporation MIKE AND JOHN, INC.						
3. Principal Office Address 1475 MAIN STREET			City WEST WAR	WICK	State RI	Zıp 02893	
NAICS Code	6. Brief descri	otion of the charac	ter of business co	onducted in Rhode Isl	and	<u>-</u>	
531110 "	REAL ESTATE INVESTMENT						
State of Incorporation RHODE ISLAND							
List ALL officers (names and add		Check the box to indicate an attachment					
President Name MICHAEL G. ROCH			Vice-President	Vice-President Name JOHN P. ROCH			
Street Address 1475 MAIN STREET			Street Address	Street Address 1475 MAIN STREET			
WEST WARWICK	State RI	Zip 02893	City WEST W	ARWICK	State RI	^{Zıp} 02893	
ecretary Name MICHAEL G. ROCH		1		e JOHN P. ROCH		• •	
Street Address 1475 MAIN STREET			Street Address	Street Address 1475 MAIN STREET			
City WEST WARWICK	State RI	Z ₁ P 02893	C-19 WEST WARWICK		State RI	^{Zip} 02893	
List ALL directors (names and ad Director Name	dresses)	•	Director Name	Check th	he box to in	dicate an attachment	
MICHAEL G. ROCH			Director Name	JOHN P. ROCH			
Street Address 1475 MAIN STREET	Street Address	Street Address 1475 MAIN STREET					
WEST WARWICK	State RI	Z ₁ p 02893	City WEST W	City WEST WARWICK		Zip 02893	
Director Name		•	Director Name		•		
Street Address			Street Address	Street Address			
City	State	Zip	City	City		Zip	
					ck the box to indicate an attachment PAR VALUE		
his information is currently of record in the lepartment of State.		NUMBER OF SHARES		CLASS/SERIES COMMON		NONE	
Changes require an additional filing.		200				NONE	
1 This report must be executed or	hehalf of the	corporation by an	authorized repres	entative If the corner	ation is in th	ne hands of a receiver or	
rustee, this report must be execute	d on behalf of t	the corporation by	the receiver or tru	ustee.			
Inder penalty of perjury, I declar statements, and that all statemer	its contained i		•	ncluding any accomp	oanying sc	hedules and	
Name of Authorized Representative					Date	,	
JOHN P. ROCH, VICE PRESIDENT					1 11	5-2000	

 $(x_1, x_2, \dots, x_n) = (x_1, \dots, x_n) = (x_1, \dots, x_n)$

MAIL TO: V

Division of Business Services

Signature of Authorized Representative

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www sos ri gov