



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

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BUS SVCS DIV

2020 DEC 22 - 1:57

1. Entity ID Number 000058749		2. Exact name of the Corporation SJS, Inc.			
3. Principal Office Address P.O. Box 319			City Bristol	State RI	Zip 02809
4. NAICS Code 541910		6. Brief description of the character of business conducted in Rhode Island Business Consulting			
5. State of Incorporation RI					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment ☐
President Name Ira C. Magaziner			Vice-President Name None		
Street Address 184 Poppasquash Road			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Secretary Name None			Treasurer Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses)					Check the box to indicate an attachment ☐
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State. Changes require an additional filing.		Check the box to indicate an attachment ☐			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
		100	CNP	0	
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 Ira C. Magaziner				Date 12/14/20	
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

JAN 15 2021

QQMTS

FORM 630 - Revised: 08/2020