



State of Rhode Island

Department of State - Business Services Division

FILED

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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.

1. Entity ID Number 95341		2. Exact name of the Corporation a jour jewelry, inc.			
3. Principal Office Address Bristol Landing, 325 Metacom Avenue			City Bristol	State RI	Zip 02809
4. NAICS Code 811490		6. Brief description of the character of business conducted in Rhode Island To engage in the business of custom jewelry model making			
5. State of Incorporation RI					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Klaus Kutter			Vice-President Name None		
Street Address 57 Sherman Avenue			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Secretary Name Klaus Kutter			Treasurer Name Klaus Kutter		
Street Address 57 Sherman Avenue			Street Address 57 Sherman Avenue		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name Klaus Kutter			Director Name None		
Street Address 57 Sherman Avenue			Street Address		
City Bristol	State RI	Zip 02809	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.			NUMBER OF SHARES		CLASSIFIRES
			100		Common
					No Par Value
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 Klaus Kutter					Date 01/11/21
Signature of Authorized Representative 					

MAIL TO:  
 Division of Business Services  
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