



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

Annual Report for the year: 2021
 Corporation

FILED

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

FEB 12 2021
 190 DS

1. Entity ID Number 13790	2. Exact name of the Corporation V. J. M. INC		
3. Principal Office Address 22 RUGGIERI CIRCLE		City CRANSTON	State RI
		Zip 02920	
4. NAICS Code 531110	6. Brief description of the character of business conducted in Rhode Island REAL ESTATE		
5. State of Incorporation RI			

7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name VINCENT J. MARANDOLA		Vice-President Name LORI A. DIAS	
Street Address 22 RUGGIERI CIRCLE		Street Address 107 SUNDALE RD.	
City CRANSTON	State RI	City CRANSTON	State RI
Secretary Name GERALDINE MARANDOLA		Treasurer Name VINCENT J. MARANDOLA	
Street Address 22 RUGGIERI CIRCLE		Street Address 22 RUGGIERI CIRCLE	
City CRANSTON	State RI	City CRANSTON	State RI
		Zip 02920	

8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name VINCENT J. MARANDOLA		Director Name LORI A. DIAS	
Street Address 22 RUGGIERI CIRCLE		Street Address 107 SUNDALE RD	
City CRANSTON	State RI	City CRANSTON	State RI
		Zip 02920	
Director Name GERALDINE MARANDOLA		Director Name	
Street Address 22 RUGGIERI CIRCLE		Street Address	
City CRANSTON	State RI	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	
		100	COMMON
			NO PAR

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 VINCENT J. MARANDOLA	Date 2-4-21
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Signature of Authorized Representative
PRES.