



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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 R.I. DEPT. OF STATE
 BUS SVCS DIV

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1. Entity ID Number 001672650		2. Exact name of the Corporation JBC TRANSPORTATION INC			
3. Principal Office Address 424 BUDLONG RD			City CRANSTON	State RI	Zip 02920
4. NAICS Code 484121		6. Brief description of the character of business conducted in Rhode Island GENERAL FREIGHT TRUCKING LONG DISTANCE			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name JOSE CARRASCOZA			Vice-President Name JOSE CARRASCOZA		
Street Address 424 BUDLONG RD			Street Address 424 BUDLONG RD		
City CRANSTON	State RI	Zip 02920	City CRANSTON	State RI	Zip 02920
Secretary Name JOSE CARRASCOZA			Treasurer Name JOSE CARRASCOZA		
Street Address 424 BUDLONG RD			Street Address 424 BUDLONG RD		
City CRANSTON	State RI	Zip 02920	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			Director Name		
Street Address			Street Address		
City	State	Zip	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
			400	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. <i>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.</i>					
Name of Authorized Representative JOSE CARRASCOZA				Date 06/30/2021	
Signature of Authorized Representative 				FILED	

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