



State of Rhode Island  
**Department of State - Business Services Division**

**Annual Report for the year: 2022**  
**Corporation**

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP  
 FEB 14 2022  
 BY *7488 OS*

1. Entity ID Number <b>91315</b>		2. Exact name of the Corporation <b>A.J.C., Inc.</b>			
3. Principal Office Address <b>6454 Post Road</b>			City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>
4. NAICS Code <b>23611</b>		6. Brief description of the character of business conducted in Rhode Island <b>to act as a General contractor for the construction, repairing and remodeling of buildings of all kinds.</b>			
5. State of Incorporation <b>Rhode Island</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Andrew J. Catanzaro</b>			Vice-President Name <b>None</b>		
Street Address <b>6454 Post Road</b>			Street Address		
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City	State	Zip
Secretary Name <b>Andrew J. Catanzaro</b>			Treasurer Name <b>Andrew J. Catanzaro</b>		
Street Address <b>6454 Post Road</b>			Street Address <b>6454 Post Road</b>		
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>None</b>			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 <b>This information is currently of record in the Department of State.</b>		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
<b>Changes require an additional filing.</b>		NUMBER OF SHARES		CLASS/SERIES	
		PAR VALUE			
		<b>1,500</b>	<b>common</b>	<b>no par</b>	
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 <b>Andrew J. Catanzaro</b>					Date <b>2-9-2022</b>
Signature of Authorized Representative <i>Andrew J. Catanzaro</i>					