



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.

RECEIVED
 RI DEPT. OF STATE
 BUS SVCS DIV
 2022 JUL 11 PM 12:23
 AMP

1. Entity ID Number 000059213	2. Exact name of the Corporation S. J. DAME, Inc			
3. Principal Office Address 90 Jefferson Drive		City EAST GREENWICH	State RI	Zip 02818
4. NAICS Code 323111	6. Brief description of the character of business conducted in Rhode Island Commercial Printing Co.			
5. State of Incorporation RI				

7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name JOHN Y. REUTEN			Vice-President Name		
Street Address 90 Jefferson Drive			Street Address		
City EAST GREENWICH	State RI	Zip 02811	City	State	Zip
Secretary Name Stanley R. Reuten			Treasurer Name Stanley R. Reuten		
Street Address 90 Jefferson Drive			Street Address 90 Jefferson Drive		
City EAST GREENWICH	State RI	Zip 02818	City EAST GREENWICH	State RI	Zip 02818

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/SER-ES
		100	\$ 1.00
		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.

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 Stanley R. Reuten	Date 7-10-2022
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Signature of Authorized Representative <i>Stanley R. Reuten</i>	FILED
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