



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
 Corporation

FILED

FEB 15 2023

BY 1899 JS

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

| | | | | | |
|--|--|---|---|-------------------------------|----------------------------|
| 1. Entity ID Number 138869 | | 2. Exact name of the Corporation 308 State Street <i>JINC</i> | | | |
| 3. Principal Office Address 12 Bullock Avenue | | City Barrington | | State RI | Zip 02806 |
| 4. NAICS Code 531390 | | 6. Brief description of the character of business conducted in Rhode Island to buy, sell, manage and maintain real estate and rental property and any and all lawful business thereto | | | |
| 5. State of Incorporation Rhode Island | | | | | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| President Name John H. Aguiar, Jr. | | | Vice-President Name Aaron J. Aguiar | | |
| Street Address 12 Bullock Avenue | | | Street Address 4 Tiffany Circle | | |
| City Barrington | | State RI | Zip 02806 | City Barrington | |
| Secretary Name Marie E. Aguiar | | Treasurer Name Marie E. Aguiar | | | |
| Street Address 12 Bullock Avenue | | | Street Address 12 Bullock Avenue | | |
| City Barrington | | State RI | Zip 02806 | City Barrington | |
| 8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| Director Name John H. Aguiar, Jr. | | | Director Name Marie E. Aguiar | | |
| Street Address 12 Bullock Avenue | | | Street Address 12 Bullock Avenue | | |
| City Barrington | | State RI | Zip 02806 | City Barrington | |
| Director Name Aaron J. Aguiar | | | Director Name Alison M. Aguiar | | |
| Street Address 4 Tiffany Circle | | | Street Address 12 Bullock Avenue | | |
| City Barrington | | State RI | Zip 02806 | City Barrington | |
| 9. Shares Authorized 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 200 | CLASS/SERIES Common | PAR VALUE 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 John H. Aguiar, Jr., President | | | | Date 2/4/23 | |
| Signature of Authorized Representative <i>John H. Aguiar Jr.</i> | | | | | |

MAIL TO:
 Division of Business Services
 148 W River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov