State of Rhode Island
Department of State - Business Services Division

Annual Re[redacted]or the year: 2023
Corporation[redacted]

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

FILED
FEB 21 2023
BY

1. Entity ID Number	2 Exact name of the Corporation
529945	GJ Corporation

3. Principal Office Address	City	State	Zip
1358 Plainfield Street	Johnston	RI	02919

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
81	Retail Liquor Sales
5 State of Incorporation	
RI	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name			Vice-President Name		
Elie Nehme			Jeanette El-Mouchantaf		
Street Address 60 Bicentennial Way			Street Address 60 Bicentennial Way		
City North Providence	State RI	Zip 02911	City North Providence	State RI	Zip 02911
Secretary Name Jeanette El Mouchantaf			Treasurer Name Elie Nehme		
Street Address 60 Bicentennial Way			Street Address 60 Bicentennial Way		
City North Providence	State RI	Zip 02911	City North Providence	State RI	Zip 02911

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

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 ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	None	Common	No 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	Date
Jeanette El-Mouchantaf	2/17/2023

Signature of Authorized Representative

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