



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: **2023**
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

MAR 16 2023

BY 11460
DS

1. Entity ID Number 000067429		2. Exact name of the Corporation JESSIE JEAN ENTERPRISES, INC.			
3. Principal Office Address 26 Shannon Road			City Wakefield	State RI	Zip 02879
4. NAICS Code 11411		6. Brief description of the character of business conducted in Rhode Island Commercial Fishing Industry			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Margaret H. Doyle			Vice-President Name none		
Street Address 26 Shannon Road			Street Address		
City Wakefield	State RI	Zip 02879	City	State	Zip
Secretary Name Margaret H. Doyle			Treasurer Name Margaret H. Doyle		
Street Address same as above			Street Address same as above		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name none			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		
			-0-		
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 Margaret H. Doyle					Date 3/4/2023
Signature of Authorized Representative <i>Margaret H. Doyle</i>					

MAIL TO:
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