



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: **2024**  
Corporation

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

REC'D RIDOS BSD  
24 FEB 5 PM 1:46:49  
STATE OF RHODE ISLAND

1. Entity ID Number <b>001759526</b>			2. Exact name of the Corporation <b>JAMO Installs, Inc.</b>		
3. Principal Office Address <b>42 Ethan Way</b>			City <b>Tiverton</b>	State <b>RI</b>	Zip <b>02878</b>
4. NAICS Code <b>238290</b>		6. Brief description of the character of business conducted in Rhode Island <b>To provide appliance installation services, any ancillary purposes, and all other lawful purposes</b>			
5. State of Incorporation <b>RI</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>Jeremy Oliveira</b>			Vice-President Name		
Street Address <b>42 Ethan Way</b>			Street Address		
City <b>Tiverton</b>	State <b>RI</b>	Zip <b>02878</b>	City	State	Zip
Secretary Name <b>Jeremy Oliveira</b>			Treasurer Name <b>Jeremy Oliveira</b>		
Street Address <b>42 Ethan Way</b>			Street Address <b>42 Ethan Way</b>		
City <b>Tiverton</b>	State <b>RI</b>	Zip <b>02878</b>	City <b>Tiverton</b>	State <b>RI</b>	Zip <b>02878</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			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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
			100		
			Common Shares		
			0.01 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 <b>Jeremy Oliveira</b>			Date <b>1/22/2024</b>		
Signature of Authorized Representative 			BY <b>117</b>		