RI SOS Filing Number: 202458246760 Date: 7/22/2024 4:00:00 PM

	State of Rhode Island Department of Sta	Ind State - Business Services Division   FILED							
Annual F	Report for the year:					JUL 2 2 2024			
Corporation ————————————————————————————————————								_	
Filing Fee: \$50.00 Penalty: Additional \$25.00 fee if form is not filed by May 31.									
	ialty: Additional \$25.00 fo ID Number	ee if form is not file  2. Exact name of		<u> </u>					
•	12819 Jewel Case Corporation								
							Zip		
110 Dupont Drive				Provide	ence	RI		02907	
4. NAICS	Code	6. Brief descriptio	on of the character	of busines	s conducted in Rhode Isl	I and			
315990	0	Manufacture	Manufacturers of presentation boxes						
5. State o	of Incorporation	Manufacture	ns or present	SCINGUOII DONCO					
Rhode	ode Island								
	7. List ALL officers (names and addresses)  Check the box to indicate an attachment								
President I	I nerese J. Eise	en		Vice-President Name					
Street Add	Street Address P.O. B ox 1216				Street Address				
	st Greenwich	State RI	<sup>Zip</sup> 02818	City		State		Zip	
Secretary I	Name Elizabeth D. Sl	locum		Treasurer Name					
Street Add	dress 1628 Wading H	leron Way		Street Address					
City The	villages	State FL	<sup>Zip</sup> 32163	City		State		Zip	
8. List AL	L directors (names and ac	ddresses)		In:	Check the box	to indica	ite an atta	ichment 🔲	
Director Na	ame			Director Name					
Street Address				Street Address					
City		State	Zip	City		State		Zip	
Director Na	Director Name			Director Name					
Street Address				Street Address					
City		State	Zip	City		State		Zip	
	s Authorized		10. Shares Issue	_	Check the bo	x to indic			
This information is currently of record in the Department of State.			NUMBER OF SH	ER OF SHARES CLASS/SERIES PAR			PAR VALUE		
Changes require an additional filing.				-		$\longrightarrow$			
11. This r	report must be executed a	in behalf of the cor	poration by an aut	pration by an authorized representative. If the corporation is in the hands of a					
ceiver 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									
Theres	Therese J. Eisen								
Signature of Authorized Representative									

MAIL 70: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.n.gov

## Jewel Case Corporation Entity ID Number: 12819

2024 Annual Report

Box 10 - Shares Issued

Number of Shares	Class	Par Value		
3902	Common	No Par		
315	4% Preferred	\$1,000		
700	6% Series E	\$1,000		

**FILED** 

JUL 2 2 2024