State of Rhode Island
Department of State - Business Services Division

STAMP

Annual Report for the year: 2025
Corporation

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

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

1. Entity ID Number	2. Exact name of the Corporation			
000120881	K&J OF RHODE ISLAND INC. 2025 AUG -1 A 11:17			
3. Principal Office Address		City	State	Zip
245 KAUFMAN ROAD		TIVERTON	R.I.	02878
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
235500	New Home Construction and Remodeling			
5. State of Incorporation				
R.I.				

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

President Name			Vice-President Name		
JAMES MARCOUX			KENNETH FORAND		
Street Address			Street Address		
245 KAUFMAN ROAD			88 COOLIDGE ST		
City	State	Zip	City	State	Zip
TIVERTON	R.I.	02878	SWANSEA	MA.	02777
Secretary Name			Treasurer Name		
Street Address N/A			Street Address N/A		
City	State	Zip	City	State	Zip

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

Director Name			Director Name		
Street Address			Street Address		
City N/A	State	Zip	City N/A	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.			

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
James Marcoux	FILED	7/28/2025
Signature of Authorized Representative	AUG 1 2025	
James Marcoux		

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

BY PAPOI

FORM 630- Revised 12/2023