

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ____

2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by

law (R.I.G.L. 7-1.2-1501(e), b) is subject to a heavily fee of \$25.00

law (R.I.G.L. 7-1.2-1501(c&d)) i	s subject to a penalty fe	e of \$25.00.					
1. Corporate ID No. 70183	2. Name of Corporation JSSL, INC.						
3. Street Address Principal Business Office 1010 DOUGLAS AVENUE			Gity SMITHFIELD	State RI	^{Zip} 02917		
4. Business Phone No.		5. State of Incorporation RHODE ISLAND					
6. Brief Description of the Character DEAL IN REAL PROPERT			HOUSES AND OTHER BUIL	DINGS			
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTAC	$HMENT) \square$ FILL IN SPACE	S BEFORE USING ATT	ACHMENTS		
President Name			Vice President Name				
JAMES STEPHEN			CAROLYN STEPHEN				
Street Address 13 WINSOR COURT			Street Address 13 WINSOR COURT				
^{Citi} LİNCOLN	State RI	<i>zi</i> ⊵ 02865	GIN LINCOLN	State RI	<i>Zip</i> 02865		
Secretary Name CAROLYN STEPHEN	>#**********************	#8	Treasurer Name JAMES STEPHEN				
Street Address			Street Address				
13 WINSOR COURT			13 WINSOR COURT				
Gity LINCOLN	State RI	<i>Ζίρ</i> 02865	Gity LINCOLN	State RI	<i>Zip</i> 02865		
8. NAMES AND ADDRESSES	OF THE DIRECTORS	: ("X" BOX FOR ATTA	<i>(CHMENT)</i> TILL IN SPACE	ES BEFORE USING AT	TACHMENTS		
Director Name JAMES STEPHEN			Director Name CAROLYN STEPHEN				
Street Address			Street Address				
13 WINSOR COURT			13 WINSOR COURT				
City	State	Zip	Citr	State	Zip		
LINCOLN	RI	02865	LINCOLN	RI	02865		
Director Name		•	Director Name	***************************************	***************************************		
Street Address			Street Address				
City	State	Zip	City	State	Zip		
9. SHARES AUTHORIZED ("X" BOX FOR ATTAC	l BMENT) □	10. SHARES ISSUED ("X"	and the first of the second of the second of	v 70 □		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value		
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This report must be executed this report must be executed	•	•	I representative. If the corpora	ation is in the hands of a	receiver or trustee,		

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Under penalty of perjury, I declare and a	ffirm that I have examined this repor
including any accompanying schedules a	and statements, and that all statement
contained herein are true and correct.	
James Stephen	1125/2008
Signature	Bate -
JAMES STEPHEN	
Print or Type Name	

PRESIDENT

Title