



State of Rhode Island
Department of State - Business Services Division

2022 MAY 16 A 9:34

STAMP

Annual Report for the year: 2022
Corporation

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

1. Entity ID Number 001680167		2. Exact name of the Corporation JW Partnership Realty, INC			
3. Principal Office Address 6 Apple tree Ln			City Barrington	State R.I	Zip 02806
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island Rental property.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name William O. Medina Delgado			Vice-President Name		
Street Address 6 Apple tree Ln			Street Address		
City Barrington	State R.I	Zip 02806	City	State	Zip
Secretary Name Jennifer Medina			Treasurer Name		
Street Address 6 Apple tree Ln			Street Address		
City Barrington	State RI	Zip 02806	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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 Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State.			NUMBER OF SHARES 200	CLASS/SERIES	PAR VALUE \$ 0.0100
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 William O. Medina Delgado				Date 5-15-2022	
Signature of Authorized Representative William Medina					

FILED