



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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 2007

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(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000160614		2. Name of Corporation Sun West Mortgage Company, Inc.			
3. Street Address Principal Business Office 18303 Gridley Road			City Cerritos	State CA	Zip 90703
4. Business Phone No. 562.924.7884		5. State of Incorporation California			
6. Brief Description of the Character of Business Conducted in Rhode Island Mortgage Banking/Lending					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Hari S. Agarwal			Vice President Name Pavan S. Agarwal		
Street Address 18303 Gridley Road			Street Address 18303 S. Gridley Road		
City Cerritos	State CA	Zip 90703	City Cerritos	State CA	Zip 90703
Secretary Name Sharda Agarwal			Treasurer Name Hari S. Agarwal		
Street Address 18303 S. Gridley Road			Street Address 18303 Gridley Road		
City Cerritos	State CA	Zip 90703	City Cerritos	State CA	Zip 90703
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Har S. Agarwal Director, and Tresurer			Director Name Pavan S. Agarwal, Director		
Street Address 18303 S. Gridley Road			Street Address		
City Cerritos	State CA	Zip 90703	City	State	Zip
Director Name N/A			Director Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
80,000	common	0	13,070	COMMON	0

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.

File Date **FILED**
Check No. **NOV 13 2007**
By: **13248**
FOR SECRETARY OF STATE USE ONLY

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.

Hari S. Agarwal 10/06/07
Signature Date
Hari S. Agarwal
Print or Type Name
President
Title