

A. Ralph Mollis, Secretary of State

Corporations Division 148 W. River Street Providence, RI 02904-2615

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## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 - Filing Fee: \$50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

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T. ID No.	2. Exact name of the	act name of the limited liability company							
91293	ODETS PRODUC	S PRODUCTIONS LLC							
3. State of Formation	4. Brief dese	cription of the	character of the business	which is actually conducted in Rhode	Island				
RHODE ISLAND	THEATE	R, MUSIC	AND ENTERTAINMEN	NT PRODUCTION.					
5. Principal office addres.	ç			City	State		Zip		
37 Sockanosset Cross Road			Cranston	RI	ſ	02920			
6. MAILING ADDRE	SS OF LIMITED L	IABILITY (	COMPANY AND NAI	ME OR TITLE OF CONTACT P	ERSON:				
Contact Name				Contact Title					
Sanford H. Gorodetsky				Manager					
Street Address				CHŲ	State		Zip		
37 Sockanosset Cross Road			Cranston	RI		02920			
7. NAME AND ADD	RESS OF EACH MA	ANAGER C	F THE LIMITED LL	ABILITY COMPANY, IF APPLI	CABLE - DO N	OT LIST	MEMBERS		
				TTACHMENTS ("X" BOX FOR					
Manager Name			Manager Name	Manager Name					
Sanford	H. Gorođe	tsky							
Street Address				Street Address					
37 Sock	anosset Cr	oss Ro	ad						
City	State		Ζip	City	State		Zip		
Cranston	RI		02920						
Manager Name		••••••	***************************************	Manager Name	*****************	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Street Address			Street Address						
	,			<u> </u>					
City	State		Zip	City	State		Zip		
O DECIDENT ACUN	T IN DUODE ISLA	ND DOI			 				
Agent Name	I IN KHODE ISLA	ND - DO I	OI ALIEK - Chang	ges require filing of Form 64	12 - R.1.G.L. 7-1	b-11			
•	ETOKY			71607 (35					
SANFORD H. GOROD  Address	EISNI			Z94		T	<del></del>		
				City		Zip			
37 SOCKANOSSET CROSSROAD			CRANSTON		02920				

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

File Date	8-30-07
Check No.	13363
Ву:	mne
I	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.

Sanford H. Gorodetsky

Print or Type Name of Authorized Person