



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

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.

1. ID No. 99192		2. Exact name of the limited liability company PFS Development, LLC.			
3. State of Formation Rhode Island		4. Brief description of the character of the business which is actually conducted in Rhode Island operate and manage gasoline service station, convenience store & car wash			
5. Principal office address 151-155 Taunton Avenue		City E. Providence	State RI	Zip 02914	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Paul Sroczyński		Contact Title Manager			
Street Address 352B Ka'elepulu Drive		City Kailua	State HI	Zip 96374	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name Paul Sroczyński		Manager Name N/A			
Street Address 352 B Ka'elepulu Drive		Street Address			
City Kailua	State HI	Zip 96734	City	State	Zip
Manager Name N/A		Manager Name N/A			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name Leonard M. Cordeiro, Esq.		Address 35 Highland Avenue			
Address		City E. Providence		Zip 02914	

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

File Date	FILED
Check No.	SEP 10 2007
By:	1241
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.

Signature of Authorized Person
Date 8/31/07
PAUL F. SROCZYŃSKI
Print or Type Name of Authorized Person