

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

PRÖFIT	CORPORATION	ANNUAL REPORT FOR THE YEAR	2007
Filing Period	Ianuary 1 - March 1 .	Filing Fee: \$50.00	

ruing Perioa: January 1 - 1	-				
* In accordance with R.I.G.L. 7-1.2-1501(e), e I. Corporate ID No. 153113	2. Name of Corporation failing or refus Name of Corporation NML Holdings, 1	1	hirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject i	to a penalty fee of \$25.00.
3. Street Address Principal Busine.	ss Office		City	State	Zip
c/o One Turks Head	Place, Ste. :	1200	Providence	RI	02903
4. Business Phone No.		5. State of Incorporation			The state of the s
401-455-0700		RHODE ISLAND			
6. Brief Description of the Charac	ter of Business Conducte	d in Rhode Island	e i i i in te e de l'e VAntellinin rephilining que que d'Antellinin reconstruire e v	The transfer of the second sec	
Investment		State of the state		TO THE SAME OF	**************************************
President Name	LS OF THE GEFICE	RS ("A" BUX FURAITA	CHMENT) TILL IN SPACES Vice President Name	BETOKE USINGATIACI	IMENIS
Nils Magnus Lilja			rice President Hame		
Street Address	••		Street Address	The second of th	
c/o One Turks Head	Place, Ste. 1	200			
City	State	Zip	City	State	Zip
Providence	RI	02903		1	•
Secretary Name	» » «		Treasurer Name	H * 2 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Nils Magnus Lilja			Nils Magnus Lilja		
Street Address			Street Address		
c/o One Turks Head	Place, Suite	1200	c/o One Turks Head	Place, Suite 12	00
City	State	Zip	City	State	Zip
Providence	RI	02903	Providence	RI	02903
8. NAMES AND ADDRESS	ES OF THE DIRECT	ORS ("X" BOX FOR AT	TACHMENT) TILIMIN SPACI	S BEFORE USING ATTA	CHMENTS
Director Name			Director Name		
Street Address			Street Address	NEW AND ADMINISTRATION OF THE PARTY OF THE P	
City	State	Zip	City	State	Zip
Director Name	ř	• • • .	Director Name		· · · · · · · · · · · · · · · · · · · ·
Street Address	$e^{-\frac{1}{2}\sqrt{2}-\frac{1}{2}\sqrt{2}} + e^{-\frac{1}{2}\sqrt{2}\sqrt{2}} + e^{-\frac{1}{2}\sqrt{2}\sqrt{2}\sqrt{2}} + e^{-\frac{1}{2}\sqrt{2}\sqrt{2}$	· · · · · · · · · · · · · · · · · · ·	Street Address		to at Association
. City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED	CX+BOX FOR ATTA	CHMENT)	10. SHARES ISSUED ("X" BOX	FOR ATTACHMENT)	
AUTHORIZED SHARES		And a second support to the second	ISSUED SHARES	THE MENT OF STREET STREET, STR	2年至4年7月2日,19年2日至20日 1980年 1
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
10,000 \$0.01 PAR VALU	E		100	Common	\$0.01 Par
, 1 1 4/4, 1114, 1111499 1 1 1 1 1					
					:
This report must be executed up hehalf of the	corporation by an authorized re	presentative If the compression is in	the hands of a receiver or trustee, this report m		mine a second
This report mast be executed on behalf of the	corporation by an azimmize a re	mesemanive. If the corporation is in	the names of a receiver of trastee, this report in	usi ne executea na nenati of the corp.	oration by the receiver or trustee.
	 				
1 5 3 1	1 1 3		Under penalty of perjury, I		
-		7	this report, including any a		
153113 DB@-05/1 <u>6/</u> 07	02:59:47 PM	-2 FH 2:57	and that all statements con	tained herein are true and	correct.
File Date FILED	•	FR-6 NO 6	200 2002	Cont 1 A	£30.
	07		Signature	Date Date	LUUT
Check No. OCT 0 2 20	U/		Nils Magnus Lilja	- 4	
Qh.	15		Print by Type Name		
By: By			President		
FOR SECRETARY OF STATE U	JSE ONLY		Title		T (00 15 17 17 17 17 17 17 17 17 17 17 17 17 17
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