

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.

L. ID No.	2. Exact name of the limited li	2. Exact name of the limited liability company				
153266	J n G Consulting LLC	J n G Consulting LLC				
3. State of Formation RHODE ISLAND	4. Brief description of CONSULTING,	of the character of the busines. MANUFACTURING OF E	s which is actually conducted in Rhod EMBLEMS AND COSTUME JEW	le Island VELRY		
5. Principal office address 44 HIGHLAND TERRACE			SC 1 TVATE	State R T	02857	
JAcques	NEVCHERUM	IY COMPANY AND NA	ME OR TITLE OF CONTACT Contact Title PRESIDENT	PERSON:	'	
Street Address 44 14 GHLAND TORRAG			PRESIDENT Cuy SCIOVATE	State	I 02857	
			ABILITY COMPANY, IF APPL ATTACHMENTS ("X" BOX FO	ICABLE - <u>DO I</u> R ATTACHMENT)	NOT LIST MEMBERS	
Manager Name JACques NEVCHERUAN Street Address 44 141644AND TERRACE City State SCITVATE RI 02857 Manager Name			Street Address			
CUTVATE	State RT	02857	СЦу	State	Zíp	
Manager Name		****************************	Manager Name		J	
Street Address			Street Address			
Жу	State	Zip	City	State	Zip	
B. RESIDENT AGEN Ngent Name JACQUES R. NEVCH) NOT ALTER - Chang	es require filing of Form 64 Address	 42 - R.I.G.L. 7-1	6-11	
Address 44 HIGHLAND TERRACE			City NORTH SCITUATE		Zψ 02857-	

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

File Date	FILED
heck No.	SEP 2 6 2007
	By /17
By:FOR SE	By 117 CCRETARY OF STATE USE ONL

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	9/11/07
Signature of Authorized Person	Date

Thegoas R Neveltenum

Print or Type Name of Authorized Person