



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

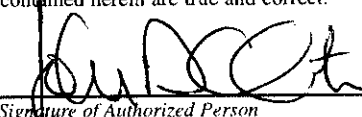
Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

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. 143020		2. Exact name of the limited liability company OSJ PEP Investments, LLC	
3. State of Formation Rhode Island		4. Brief description of the character of the business which is actually conducted in Rhode Island Development, acquisition, construction, ownership, sale and lease of real estate	
5. Principal office address 375 Commerce Park Road		City North Kingstown	State RI
		Zip 02852	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name John Conforti		Contact Title Manager	
Street Address 375 Commerce Park Road		City North Kingstown	State RI
		Zip 02852	
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 Marc Perlman		Manager Name Alan Perlman	
Street Address 375 Commerce Park Road		Street Address 375 Commerce Park Road	
City North Kingstown	State RI	City North Kingstown	State RI
Zip 02852		Zip 02852	
Manager Name John Conforti		Manager Name	
Street Address 375 Commerce Park Road		Street Address	
City North Kingstown	State RI	City	State
Zip 02852		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 Andrew G. Sholes		Address	
Address 1375 Warwick Avenue		City Warwick	Zip 02888

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

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
9-14-07
John D. Conforti, CPA, CFO
Print or Type Name of Authorized Person

FILED	
File Date	SEP 28 2007
Check No.	By 254060
By:	
FOR SECRETARY OF STATE USE ONLY	