

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.	2. Exact	name of the limited liabil	ity company						
119336	THREE KIDS, LLC								
3. State of Formation			e character of the business wh	ich is actually	conducted in Rhode Islan	d			
RHODE ISLAND		REAL ESTATE							
5. Principal office address				City		State		Zip	
215 Spencer Avenue 5. MAILING ADDRESS OF LIMITED LEGILLITY COMPANY AND NAME				East	Greenwich	RI		02818	
Contact Name Dwight Lei		MIPELERYDISIS	COMMANYANDAAHE	Contact Tit		ONI.			
Street Address				City State		Zip			
215 Spencer Avenue					Greenwich	RI		02818	
7. NAME AND ADDR	ESS OF	EÄCH MANAGER C FILL IN SPACE	F THE LIMITED LIAB S BEFORE USING ATT	LITY COM	(PANY, IF APPLICAB S ("X" BOX FOR ATT	LE - DO N	NOT LIST	<u>MEMBERS</u>	
Manager Name				Manager Name					
Dwight Leigh				•					
Street Address 215 SPencer Avenue				Street Address					
City East Green	wich	State RI	^{Zip} 02818	City		State		Zip	
Manager Name				Manager Name					
Street Address				Street Address					
City		State	Zip	City		State		Zip	
8. RESIDENT AGENT Agent Name ROBERT V. COLAGION		DDE ISLAND - DO N	OT ALTER - Changes	: require fil Address	ling of Form 642 - 1	 R.I.G.L. 7-1	6-11	l	
Address				City			Zip		
3010 POST ROAD				WARWICK			02886-		

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

File Date	
Check No	OCT 1 7 2007
Ву:	DECKBIARY 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

Dwight Leigh
Print or Type Name of Authorized Person

Form 632 Rev. 07/07