

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

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

FORM MUST BE TY	PED OR PRINTED IN BLA	(CK)				
1. ID No. *112703*	2. Exact name of the lim	iited liabilty company				
3. State of Formation			he business which is actually conducte	ed in Rhode Island		
RHODE ISLAND	GAS AND F	OOD STATION	ŕ			
5. Principal office address 691 NORTH MAIN STREET			City PROVIDENCE	State RI	Zip 02904	
property of the second		E Chineses		The state of the s		
Contact Name NELLY A HEBS	HIE		Contact Title MEMBER	Contact Title		
Street Address NORTH MAIN SALES, 691 NORTH MAIN ST.			City PROVIDENCE	State RI	<i>Zip</i> 02904	
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Manager Name	10		•Manager Name •			
Street Address			• Street Address	• Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			•Street Address	• Street Address		
City	State	Zip	City	State	Zip	
Agent Name		- 1000	Address	Address		
ROBERT A. PERETTI, ESQ.			1536 WESTMINS	1536 WESTMINSTER STREET		
Address			City	Zip)	
			PROVIDENCE	0	02909-	

This report must be signed in ink by an authorized person pursuant to 7-16-66.



FOR SECRETARY OF STATE USE ONLY

Nellie A. Hebshie, Member Print or Type Name of Authorized Person

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.

Form 632 Rev. 6/02