

148 W. River Street Providence, RI 02904-2615 401.222.3040

2007

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR\_\_

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.

	6.7					
1. ID No.	2. Exact name of the limited liability company					
158641	RBC Professional Trader Group, LLC					
3. State of Formation DELAWARE			ch is actually conducted in Rhode Island dealer	t .		
5. Principal office address			City	State	Zip	
DELAWARE Registered broker- 5. Principal office address 666 Third Avenue, 8th Floor			NewYork	New	york 10017	
	SS OF LIMITED LIABILITY	COMPANY AND NAME	OR TITLE OP CONTACT PERS	Olygo (Andrian)	<b>新教</b> 1 下7 5 6 11	
Contact Name			Contact Title			
Judith	Tompkins					
Street Address 4/0 R	oyal Bank of C	axeda	City	State	Ζip	
One L	iberty Plaza, 16	5 Broadway	New York	NY	10006	
			LITY COMPANY, IF APPLICAB	E DO NO	OT LIST MEMBERS	
			CHMENTS ("X" BOX FOR ATT			
Manager Name		COMENU SPRESENTALLE POR COLORS C	Manager Name	CSEA human house of the second		
RBC US	A Holdco Cor	poration			w/:	
Street Address One Lib	berty Plaza, K Newyork	5# Fl.	Street Address			
New yor	k Newyork	Zip /0006	City	State	Ζip	
Manager Name	J	•••••••••••••••••••••••••••••••••••••••	Manager Name		\$ 1	
Street Address			Street Address			
City	State	Zip	City	State	-Zip <b>(</b> )	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes Agent Name CT CORPORATION SYSTEM		require filing of Form 642 - R.I.G.L. 7-16-11  Address				
Address 10 WEYBOSSET STREET			PROVIDENCE		Zip 02903-	

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

				including any accompan
File Date	EILED			contained herein are true
Check No.			las kinjska	
Bv:	UCI 1 <b>9</b> 2007	9		Signature of Authorized Po
By_	R SECRETARY OF ST	ATE USE ONLY		Print or Type Name of Au

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.

RBC USA Holdle Corporation, the member Signature of Authorized Person

Date

Lisa D, Levey, Secretary

Print or Type Name of Authorized Person

Form 632 Rev. 07/07