

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

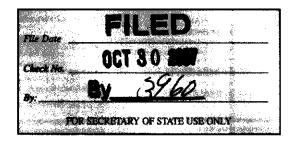
LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR ___ 2007

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	ct name of the limited liability company						
147790	RUPA,	LLC						
3. State of Formation 4. Brief description of the character of the business which COMMERCIAL REAL ESTATE RENTALS				ch is actually conducted in Rhode Island	ı			
5. Principal office address				City	State		Zip	
ONE INDUSTRIAL CIRCLE				LINCOLN	RI		02865	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME Contact Name KIRAN PATEL				OR TITLE OF CONTACT PERSON: Contact Title MEMBER				
Street Address 14 RED BROOK CROSSING				City LINCOLN	State RI		^{2ip} 02865	
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				Manager Name				
Street Address				Street Address				
City		State	Ζip	City	State		Zip	
Manager Name				Manager Name				
Street Address				Street Address				
City		State	Zip	City	State		Zip	
8. RESIDENT AGENT IN REODE ISLAND - DO NOT ALTER - Changes I Agent Name ANTHONY J. CALIRI				require filing of Form 642 - R.I.G.L. 7-16-11 Address				
Address ONE WORTHINGTON ROAD				CRANSTON Zip 02920-		I -	20-	

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

KIRAN PATEL

Print or Type Name of Authorized Person