

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.

(R.I.G.L. 7-10-00 (D&C))	is subject	to a penany jee oj \$25.00	•					
1. ID No.		name of the limited liability company						
154248	JMCB	CONSTRUCTION, LLC						
3. State of Formation 4. Brief description of the character of the business which			ib is actually conducted in Rhode Island					
RHODE ISLAND TO BUY, SELL, DEVELOP, AND RENOVA				ATE REAL ESTATE, HOMES, AND OTHER RELATED ENDEAVORS				
5. Principal office address			<i>Ci</i> ty	State		Zip		
8 WALL STREET				BRISTOL	RI		02809	
6. MAILING ADDRE Contact Name	SS OF L	IMITED LIABILITY (COMPANY AND NAME	OR TITLE OF CONTACT PERSON: Contact Title				
JOSEPH MELO, JR.								
Street Address				СИу	State		Zip	
8 WALL STREET				BRISTOL	RI		02809	
7. NAME AND ADD	RESS OF	EACH MANAGER O	F THE LIMITED LIABI	LITY COMPANY, IF APPI	LICABLE - DO N	OT LIST	MEMBERS	
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				
СИу		State	Zip	City	State		Zip	
				• • •		*********	J	
Manager Name				Manager Name				
						·····		
Street Address				Street Address				
Cuy		State	Zip	City	State		Zif)	
()		31116	(C.11)	4 Mily	, sanc		234,	
8. RESIDENT AGEN	T IN RH	i ODE ISLAND - DO N	OT ALTER - Changes	: require filing of Form :	' 642 - R.I.G.L. 7-1	6-11	1	
Agent Name				Address				
PAUL SILVA				674 HOPE STREET				
Address				City	ity Zip			
				BRISTOL	STOL 02809			
					-			

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

154248

File Date	FILED
Check No.	NOV 01 2007
Ву:	By 4425
	FOR SECRETARY OF STATE OF 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

10/31/07 Date

JOSEPH MELO, JR.

Print or Type Name of Authorized Person