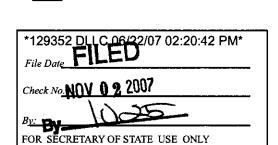


LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

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

1. ID No.	2. Exact name of the lim	itad liahiltu aamnamu					
129352	Lantern Holdings,						
3. State of Formation	4. Brief descript	ion of the character of	the business whi	ich is actually conducted	d in Rhode Island	······································	
RHODE ISLAND HOLD OWN BUY SELL MORTGAGE & LEASE REAL ESTATE							
5. Principal office address				ity	State	Zip	
32 CUSTOM HOUSE STREET SUITE 200				ROVIDENCE	RI	02903-	
	ess of Limited	ETABLLETY COM			OF CONTACT PE	RSON	
Contact Name DAVID A. CORSETTI				*Contact Title *Operating Manager			
Street Address				ty	State	Zip	
32 CUSTOM HOUSE STREET SUITE 200				ROVIDENCE	RI	02903-	
		aces bepore us	NG ATTACHS	aents	FOR ATTACHMENT)		
:							
Manager Name			• Me	• Manager Name			
			•				
Street Address			• Str	*Street Address			
			•				
City	State	Zip	•Ci	ity	State	Zip	
Manager Name			· • • • • • • • • • • • • • • • • • • •	*Manager Name			
			•	anager rame			
Street Address				• Street Address			
5. T.			•				
City	State	Zip	Cit	ty	State	Zip	
e a remena	TE IN RHODE ISEAN						
Agent Name	ASSESSMENT DESCRIPTION	A-DOMOLALIEN			om 042 - Kigl		
o a constant of the constant o			I	Address			
F. MOORE MCLAUGHLIN, IV ESQ.				32 CUSTOM HOUSE STREET, SUITE 500			
Address			Ci	City		Zip	
			F	PROVIDENCE		02903-	

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

Date

David A. Corsetti

Print or Type Name of Authorized Person