

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, Rt 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 name of the	imited liability company				
135803 PAN ZHAI, LLC	" · · · ·				
1		use which is actually conducted in Rhody Isla	nd		
	4. Brief description of the character of the business which is actually conducted in Rhode Island IMPORT, SELL AND DEAL WITH & IN ARTIFACTS AND ANTIQUES OF ALL KINDS				
	SELL AND DEAL WITH &				
5. Principal office address		City	State RI	^{Ζίμ} 02914	
940 WATERMAN AVENUE		EAST PROVIDENCE		[02914	
6. MAILING ADDRESS OF LIMITED L	IABILITY COMPANY AND N	: Contact Title	SON:		
ELIZABETH PALUMBO					
Street Address		City PROVIDENCE	State	$Z_{i\mathcal{D}}$	
940 WATERMAN AVENUE		EAST GREENWICH	' RI	02914	
		:	l	i .	
7. NAME AND ADDRESS OF EACH M			ABLE - DO NO	OT LIST MEMBERS	
FIEL	IN SPACES BEFORE USING	:	(IACHMENT)		
Manager Name		Manager Name	Manager Name		
NONE					
Street Address		Street Address	Street Address		
	_ · · - _ · · · -				
City	Ziφ	City	State	Zip	
.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Manager Name		Manager Name	Manager Name		
Street Address		Street Address	Street Address		
City- State	Zip	City	State	Zip	
	ND DONOTATED Ch	i	 DICI 716		
8. RESIDENT AGENT IN RHODE ISLA Agent Name	MD - DO NOT ALIEK - CDS	Address	- K,I.G.L. /-10		
E. COLBY CAMERON, ESQ.					
		City		Zip	
Address			02903		
56 EXCHANGE TERRACE		PROVIDENCE		02903 <i>it</i> :	

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

135803

File Date FILED	
Check No. NOV 0 2 2007	_
HOR SECRETARY OF STATE USE 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.

Elizabeth M. Palento 10-26-07 Signature of Authorized Person Date

ELIZABETH PALUMBO

Print or Type Name of Authorized Person