

**A. Ralph Mollis,** Secretary of State Corporations Division 148 W. River Street

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 name of the limited liability company					
122665	Pacific Builders, LLC					
3. State of Formation			business which is actually conducted			
RHODE ISLAND	PURCHASE	E, SALE, CONSTRUC	TION AND RENOVATION OF I	REAL ESTATE.		
5. Principal office address	4		City	State	Zip	
6. MAILING ADDRES	SS OF LIMITED LIABI	DETY COMPANY AI	NO NAME OF TITLE OF CO	WILL RESON	108818	
Contact Name	a		Contact Title	_		
KONALL	DELOPIDA	<del>L</del>	PRES/1	SFAT		
Street Address			City	State	Zip	
, , , ,	LOTTE	DR	E, GREEN	YWICH RI	02818	
7. NAME AND ADDI			TED LIABILITY COMPANY, I BING ATTACHMENTS ("X"		OT LIST MEMBERS  □	
Manager Name			Manager Name	Manaper Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zψ	
			Similar		1	
	I IN RHODE ISLAND	- DO NOT ALTER -	Changes require filing of	Form 642 - R.I.G.L. 7-1	b-11	
Agent Name			Aaaress	Address		
RONALD E. PELOPID	A					
Address			City		Zip	
167 CHARLOTTE DRIVE			EAST GREENWICH	1	02818-	
			<u> </u>			

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

File Date FILED	1.4400000000000000000000000000000000000	
Check No. NOV 1 3 2007	v -	
By: By 1025	a vieta Langua	d: 50 v.5
FOR SECRETARY OF STATE U	SE ONL	Y

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.

Result Etels In 10-1-0, Signature of Authorized Person Date

Print or Type Name of Authorized Person