



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. 131826		2. Exact name of the limited liability company Pearl Street, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE OWNERSHIP, REDEVELOPMENT, OPERTION			
5. Principal office address 1570 Westminster Street			City Providence	State RI	Zip 02909
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name H. LeBaron Preston			Contact Title Treasurer of Member		
Street Address 1570 Westminster Street			City Providence	State RI	Zip 02909
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) <input type="checkbox"/>					
Manager Name The Armory Revival Company			Manager Name		
Street Address 1570 Armory Revival Company			Street Address		
City Providence	State RI	Zip 02909	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name H. LEBARON PRESTON			Address		
Address 1570 WESTMINSTER STREET			City PROVIDENCE	Zip 02909-	

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.

File Date	<u>12-20-07</u>
Check No.	<u>A 1881 P 1884</u>
By:	<u>[Signature]</u>
FOR SECRETARY OF STATE USE ONLY	

[Signature] 10-26-07
 Signature of Authorized Person Date
H. LeBaron Preston
 Print or Type Name of Authorized Person