

[ORIGINAL]



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
148 W. River
Providence, RI 02904-261
401.222.304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by
it (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

Corporate ID No. 37091	2. Name of Corporation FAIRTAX LTD.		
Street Address Principal Business Office 60 Warren's Point Road		City Little Compton	State RI
Business Phone No. (401) 635-4822 or (401) 635-4877		5. State of Incorporation RHODE ISLAND	
Brief Description of the Character of Business Conducted in Rhode Island CONSULTING SERVICES			

9. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name E. HOWLAND BOWEN	Vice President Name ROSEMARY M. BOWEN
Street Address 60 Warren's Point Road	Street Address 60 Warren's Point Road
City Little Compton State RI Zip 02837	City Little Compton State RI Zip 02837
Treasurer Name ROSEMARY M. BOWEN	Treasurer Name E. HOWLAND BOWEN
Street Address 60 Warren's Point Road	Street Address 60 Warren's Point Road
City Little Compton State RI Zip 02837	City Little Compton State RI Zip 02837

10. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name E. HOWLAND BOWEN	Director Name ROSEMARY M. BOWEN
Street Address 60 Warren's Point Road	Street Address 60 Warren's Point Road
City Little Compton State RI Zip 02837	City Little Compton State RI Zip 02837
Director Name [Signature]	Director Name [Signature]
Street Address [Signature]	Street Address [Signature]
City [Signature] State [Signature] Zip [Signature]	City [Signature] State [Signature] Zip [Signature]

11. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
300	NO PAR VALUE		103	FAIRTAX	None
				value	

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.



FILED 37091

File Date **MAR 31 2008**

Check No. **2544**

By **[Signature]**

FOR 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 therein are true and correct.

[Signature] Date

(E. Howland Bowen)

President and Treasurer

Title