RI SOS Filing Number: 200810019410 Date: 04/14/2008 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

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 law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.***

1. Corporate ID No.	2. Name of Corporation		
148659	COMMERCIAL OFFICE LEASING, INC.		
3. Street Address Principal Business Office	City	State	Zip
76 DERRY STREET	PROVIDENCE	RI	02908
4. Business Phone No.	5. State of Incorporation		
(401) 351-1611	RHODE ISLAND		
6. Brief Description of the Character of Business Conducted in Rhode Island			
OFFICE LEASING			

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

President Name	Vice President Name
MI JUNG LEE	SUN YOUNG LEE
Street Address	Street Address
1650 DOUGLAS AVENUE, APT. 1110	1650 DOUGLAS AVENUE, APT. 1110
City / State / Zip	City / State / Zip
NORTH PROVIDENCE / RI / 02904	NORTH PROVIDENCE / RI / 02904
Secretary Name	**Treasurer Name**
HYE CHONG PARK	SUN YOUNG LEE
Street Address	Street Address
254 MIDDLE STREET	1650 DOUGLAS AVENUE, APT. 1110
City / State / Zip	City / State / Zip
PAWTUCKET / RI / 02860	NORTH PROVIDENCE / RI / 02904

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

Director Name	Director Name
MI JUNG LEE	SUN YOUNG LEE
Street Address	Street Address
1650 DOUGLAS AVENUE, APT. 1110	1650 DOUGLAS AVENUE, APT. 1110
City / State / Zip	City / State / Zip
NORTH PROVIDENCE / RI / 02904	NORTH PROVIDENCE / RI / 02904
Director Name	Director Name
Street Address	Street Address
City / State / Zip	City / State / Zip

9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
500	COMMON	~~$0.01~~ NO PAR MJL

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	COMMON	~~$0.01~~ NO PAR MJL

THIS SECTION MUST BE COMPLETED

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.

[redacted] [redacted]

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.

MI JUNG LEE — *Signature* — APRIL 7, 2008 — *Date*

MI JUNG LEE — *Print or Type Name*

PRESIDENT — *Title*

[redacted]

File Date FILED
Check No. APR 14 2008
By: By 2397
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21672-16-250447

Form 630 Rev. 12/06