



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

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. 129671		2. Exact name of the limited liability company First Press Limited Liability Company			
3. State of Formation RI		4. Brief description of the character of the business which is actually conducted in Rhode Island Sale of olive oil and related products			
5. Principal office address 7 Reuben Brown Lane			City Exeter	State RI	Zip 02822
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Vincent Santaniello			Contact Title		
Street Address 7 Reuben Brown Lane			City Exeter	State RI	Zip 02822
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 Vincent Santaniello			Manager Name Jane Argentieri		
Street Address same as above			Street Address same as above		
City	State	Zip	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 Robert Argentieri			Address		
Address 23 Merritt Road			City East Providence, RI	Zip 02915	

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

129671

File Date	<u>6-20-08</u>
Check No.	<u>3463</u>
By:	<u>MNC</u>
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 herein are true and correct.

[Signature] June 2, 2008
Signature of Authorized Person Date
Vincent Santaniello
Print or Type Name of Authorized Person