



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 2008

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

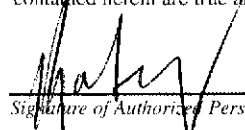
In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No. 160347		2. Exact name of the limited liability company Allens Avenue Enterprises, 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 Management	
5. Principal office address 110 Scituate Avenue		City Hope	State Rhode Island
		Zip 02831	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Kan Kit ("Brian") Cheng		Contact Title Member	
Street Address 110 Scituate Avenue		City Hope	State Rhode Island
		Zip 02831	
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 N/A		Manager Name N/A	
Street Address		Street Address	
City	State	Zip	City
Manager Name N/A		Manager Name N/A	
Street Address		Street Address	
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name Mark T. Buben, Esquire		Address	
Address 1441 Park Avenue, Suite F		City Cranston	Zip 02920

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

160347

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 of Authorized Person  Date **9/17/08**
Kan Kit ("Brian") Cheng
Print or Type Name of Authorized Person

File Date	FILED
Check No.	OCT 02 2008
By:	By 4304
FOR SECRETARY OF STATE USE ONLY	