

A. Ralph Mollis, Secretary of State Corporations Division 148 W. Ricer Street Providence, RI 02904-2615 401-232,3040

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.	2. Exact name of the limited liability company							
132072	Scung	Scungio Realty, LLC						
3 State of Formation 4. Brief description of the character of the busines			character of the business whic	hich is actually conducted in Rhode Island				
Rhode Island Real Estate holding company								
5. Principal office address				City	State		Zip	
1358 Plainfield Street				Cranston	RI		02920	
	SS OF LI	MITED LIABILITY C	OMPANY AND NAME	OR TITLE OF CONTACT PERSON: Contact Title				
Joseph Scungio III				Contact the				
Street Address				City	State		Zip	
1358 Plainfield Street				Cranston	RI		02920	
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)								
Mar:				Manager Name				
· · · · · · · · · · · · · · · · · · ·								
Street Address				Street Address				
_, _, _								
/"/iv		25.	Zin	City	State		Zip	
. 				***********	.l			
Manager Name				Manager Name				
				Street Address				
Street Address				OFFICE THE EN				
City		State	Zip	City	State		Zip	
							ĺ	
	I IN RH	ODE ISLAND - DO N	OT ALTER - Changes	require filing of Form 642 -	R.I.G.L. 7-1	6-11	ı	
Agent Name				Address				
John S. DiBona, Esq.				145 Phenix Avenue				
Address				City	Zip			
				Cranston	02920			

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

File Da	10-29-08
Check N	121
Ву:	mnc
	FOR SECRETARY OF STATE USE ONLY

132072

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 DAuthorized Herson Date

Joseph J. Scungio III

Print or Type Name of Authorized Person

Form 632 Rev. 07/07