

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

2009

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 LJ Management, Inc. 153459 3. Street Address Principal Business Office 522 Jefferson Blvd. City Warwick RI 02886 5. State of Incorporation 4. Business Phone No Rhode Island 6. Brief Description of the Character of Business Conducted in Rhode Island Management Company 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Stacey Izzo Street Address Street Address 522 Jefferson Blvd. ZipCity State Warwick RI 02886 Secretary Name Treasurer Name Stacey Izzo Stacey Izzo Street Address Street Address 522 Jefferson Blvd. 522 Jefferson Blvd. City State շւր 02886 02886 Warwick RI Warwick RI 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Street Address Street Address State Zip City City Zip Director Name Director Name Street Address Street Address State City ZipCity 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 9. SHARES AUTHORIZED ISSUED SHARES — THIS SECTION MUST BE COMPLETED Par Value Number of Shares Class/Series This information is currently of record in the Office of the Secretary of

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.

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File Date	FILED
Check No.	JAN 2 6 2009
Ву:	By \3377
F	OR SECRETARY OF STATE USE ONLY

State. Changes require an additional filing. See Section 9 of

instruction sheet.

Under penalty of perjury, I declare and affir	rm that I have examined this repor
including any accompanying schedules and contained herein are true and correct.	statements, and that all statement
	1/16/59
Signature	I I Date
Stacey Izzo Print or Type Name	
President	
Title	Form 630 Rev. 08/08

Common

\$0.01