



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 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. 18526		2. Name of Corporation LH Dissolution, Inc.			
3. Street Address Principal Business Office 303 Jefferson Boulevard			City Warwick	State RI	Zip 02888
4. Business Phone No. 4091-921-4800		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Textile Machinery					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Avishai Nevel			Vice President Name Michael L. Honeycutt		
Street Address 7 Winfield Road			Street Address 506 Bent Creek Lane		
City Providence	State RI	Zip 02906	City Spartanburg	State SC	Zip 29306
Secretary Name Avishai Nevel			Treasurer Name Michael L. Honeycutt		
Street Address 7 Winfield Road			Street Address 506 Bent Creek Lane		
City Providence	State RI	Zip 02906	City Spartanburg	State SC	Zip 29306
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Avishai Nevel			Director Name Michael L. Honeycutt		
Street Address 7 Winfield Road			Street Address 506 Bent Creek Lane		
City Providence	State RI	Zip 02906	City Spartanburg	State SC	Zip 29306
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 2	Class/Series common	Par Value no par value

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.

File Date	FILED
Check No.	FEB 13 2009
By:	By: 21043
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 Avishai Nevel Date 1/23/09
Print or Type Name
President
Title