

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 2007

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(e)\*\*d)) is

subject to a penalty fee of \$25.00.						
1. Corporate ID No. 147129	2. Name of Corporation SUDSATIONAL	2. Name of Corporation SUDSATIONAL LAUNDRY SERVICE, INC.				
3. Street Address Principal Business Office 3 HUMBERT STREET			N. PROVIDENCE	State RI	71p 02911	
4. Business Phone No. 5. State of Incorporation 401-232-0340 RHODE ISLAND						
6. Brief Description of the Character	of Business Canducted in	Rbode Island			20	
7. NAMES AND ADDRESSES President Name ZEE NA CHAN GAO	OF THE OFFICERS	: ("X" BOX FOR ATTA	GHMENT)   FILL IN SPAC	es before using	ATTACHMENTS 5	
Street Address 3 HUMBERT STREET			Street Address Sirvet Address			
O PROVIDENCE	State RI	<i>Zip</i> 02911	City	State	Zip 📆	
Secretary Name			Treasurer Name		မ မ န	
Sirvet Address			Street Address			
City	State	Zip	City	State	Zip	
8. NAMES AND ADDRESSES Director Name	OF THE DIRECTO	RS: ("X" BOX FOR ATT	TACHMENT)   FILL IN SPA	ACES BEFORE USING	FATTACHMENTS	
Street Address			Street Address			
City	State	Zip	City ·	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zíp	City	State	Zip	
9. SHARES AUTHORIZED  8000 \$ 1,00 PAR VALUE			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
This information is currently of record in the Office of the Secretary of			Number of Shares	Class/Series	Par Value	
State. Changes require an additional filing. See Section 9 of instruction sheet.			100	COMMON	\$1 PER SHARE	
			4 - 47 <b>5</b> EV 4			
File Date FILE  Check No. AUS 2.5  By: By	D 2009	poration by an authorize paration by the receiver	Under penalty of perjur	y, I declare and affirm the nying schedules and state e and correct.	nat I have examined this reportements, and that all statement but all statement but all statement but all statement but but but but but but but but but bu	
FOR SECRETARY OF ST	ATE USE ONLY		Tale		Form 630 Rev. 08/08	