



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 2009

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. 154768		2. Exact name of the limited liability company DUVAL INTERNATIONAL LLC			
3. State of Formation Rhode Island		4. Brief description of the character of the business which is actually conducted in Rhode Island Investment Company			
5. Principal office address 53rd E Street, Urbanizacion Marbella, MMG Tower, 16th Floor		City Panama	State Rep. of Panama	Zip N/A	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name David Luntz			Contact Title Authorized Person		
Street Address 509 Madison Avenue, Suite 2002		City New York	State NY	Zip 10022	
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 checked="" type="checkbox"/>					
Manager Name Luis A. Davis			Manager Name Pamela D. Hall		
Street Address 53rd E Street, Urbanizacion Marbella, MMG Tower, 16th Floor		Street Address 53rd E Street, Urbanizacion Marbella, MMG Tower, 16th Floor			
City Panama	State Rep. of Panama	Zip N/A	City Panama	State Rep. of Panama	Zip N/A
Manager Name Silvia Clarke			Manager Name Morgan Secretarial Services, Inc.		
Street Address 53rd E St., Urb. Marbella, MMG Tower, 16th Fl.		Street Address 53rd E St., Urb. Marbella, MMG Tower, 16th Fl.			
City Panama	State Rep. of Panama	Zip N/A	City Panama	State Rep. of Panama	Zip N/A
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name Corporate Creations Network Inc.			Address		
Address 7 Eva Lane		City Cranston	Zip 02921		

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

154768

FILED

File Date SEP 08 2009
Check No. By 4477
By: _____
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 of Authorized Person
Date 9/4/09
DAVID LUNTZ / AUTHORIZED PERSON
Print or Type Name of Authorized Person