

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

(R.I.G.L. 7-16-66 (b&c	c)) is subject to a penalty fee of	\$25.00.			
1. ID No. 1522	2. Exact name of the limited	liability company SALZUU U	EALTY, L.L.C.		
3. State of Formation	4. Brief description		ess which is actually conducted in Rhode i	Island	
N.I.	Hou	D MEAL ESTAT	E PON INVESTMENT		
5. Principal office addi	1150 PANK	AVE	CAANSTON	State N.I.	Zip 029/0
6. MAILING ADDI Contact Name			AME OR TITLE OF CONTACT P. Contact Title	ERSON:	
Street Address	MANU H. SA	1440	City	Tour	
	DAVID A. SA USD PA	•	CHANSTEN	State N.I.	02910
7. NAME AND AD		ER OF THE LIMITED I PACES BEFORE USING	IABILITY COMPANY, IF APPLICATION OF ATTACHMENTS ("X" BOX FOR	CABLE - DO NOT LI ATTACHMENT)	ST MEMBERS
Manager Name MA			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		J
Character Addison					
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGE Agent Name	NT IN RHODE ISLAND -	DO NOT ALTER - Char	inges require filing of Form 64 Address	 2 - R.I.G.L. 7-16-11	
					3
Address			City	Zip	C
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FIL	.ED				6 (5)
OCT 0	5 2009 This report m	ust be executed by an a	uthorized person pursuant to R.I.	G.L. 7-16-66 (b).	1
By Ci	- (257aC)			1	
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			Under Complete of Complete		
			including any accompa	hying/schedul/s and/stater	t I have examined this repornents, and that all statements
File Date		OC1 - 2 EH : 16	contained herein are to	the and correct.	1
		VIC CONTRACT			Member LLC.
-	<i>f</i> .	at a second	Signature of Authorized I	V	nte 10/ 3 09
By:	ARY OF STATE USE ONLY	- 1	Print or Type Name of A	SALUW: MOMRE	R
. GROOGHEI	O. DIME OUR ONLY		i riii or Type Name of A	шиницеи гегзоп	