

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 2008

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. 7-1.2-150).

subject to a penalty fee of \$25	5.00.	remaining or rejusting to fire its a	innual report within thirty (30)	days after the time prescribed by	law (R.I.G.L. 7-1.2-1501(c&d)) i	
1. Corporate ID No. 118685	2. Name of Corporation LBJ DedXport, Inc.					
3. Street Address Principal Business Office 32 Mechanic Avenue, P.O. Box 12			City Woonsocket	State RI	Zip	
4. Business Phone No. 401-769-8800		5. State of Incorporation Rhode Island			02895	
6. Brief Description of the Che Wholesale and retail (	aracter of Business Cond Gift Distributors	ucied in Rhode Island		The state of the s		
7. NAMES AND ADDRI	ESSES OF THE OF	FICERS: ("X" BOX FOR ATT	ACHMENT)   FILL IN	SPACES BEFORE LISTNA	G. ATTA COMPONIES	
Gregory Burbank			Vice President Name Same			
Street Address 10 Fountain Spring Lane			Street Address			
City Johnston	State RI	Zip 02919	City	State	Zip	
Secretary Name Same		Treasurer Name Same		5 ES		
Street Address			Street Address		— မှ ခြ <u>ို့</u>	
City	State	Zip	City	Serie		
8. NAMES AND ADDRE	SSES OF THE DID	FOTONS CHAPTER	•	State	Zip	
Director Name N/A	afar Abyther Mitt	ECTORS: ("X" BOX FOR AT	TACHMENT) TELL I	n spaces before usin		
NVA Street Address					<b>2</b> 200	
			Street Address		8 ***	
City	State	Zip	City	State	Zipi	
Director Name			Director Name			
Street Address			Street Address		<del>- 13</del> = -	
Git <sub>l</sub>	State	Zip	City	State		
9. SHARES AUTHORIZE			10. SHARES ISSUED	CX BOX FOR ATTAC		
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.			Number of Shares	Class/Series	Par Value	
			420	Common	No Par	
				non aust <del>at</del> ef		
This report must be execu	uted on behalf of th	e corporation by an authorize	d representative. If the co	orporation is in the hands	of a receiver or tructor	
ms report must be execu	ted on behalf of the	corporation by the receiver of	or trustee.		or transfer,	
		FILED	Under penalty of pe	erjury, I declare and affirm the	hat I have examined this report	
File Date	Charles (no Fare) (an	00 2009	contained herein ar	true and correct.	tements, and that all statements	
		Tan Zinki	Signature 54	M	9-29-09 Date	
Check No.			·/		~	
3 <i>y.</i>		_/L7-/00 <i>92<u>1</u></i>	Print or Type Name	nonk Drosida 4		
FOR SECRETARY OF	STATE USE ONLY		Title	Gregory Burbank, President		