

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. 2. Name of Corporation 118685 LBJ DedXport, Inc. Street Address Principal Business Office دىن Woonsocket 32 Mechanic Avenue, P.Ö. Box 12 RI 02895 4. Business Phone No 5. State of Incorporation 401-769-8800 Rhode Island 6. Brief Description of the Character of Business Conducted in Rhode Island Wholesale and retail Gift Distributors President Name Vice President Name **Gregory Burbank** Same Street Address Street Address 10 Fountain Spring Lane City State Zip **Johnston** RΙ 02919 Secretary Name Treasurer Name Same Same Street Address Street Address City State Zip City State 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [ FILL IN SPACES BEFORE USING ATTACHMENTS. TO N/A Street Address Street Address City State ZipCity Zip \_\_\_\_ State  $f(\cdot) = \frac{1}{4}$ Director Name Street Address Street Address City State Zij) City State Zib9. SHARES AUTHORIZED 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 420 Common No Par instruction sheet. 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. FILED 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. 9-29-09 Date Signature Print or Type Name Gregory Burbank, President FOR SECRETARY OF STATE USE ONLY