

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 2010

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(c&d)) is subject to a penalty fee of \$25.00.

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1. Corporate ID No. 98163	2. Name of Corporation LAFF, Inc.				
3. Street Address Principal Business Office 201 FOREST AVENUE			Gity MIDDLETOWN	State RHODE ISLAND	<i>Ζψ</i> 02842
4. Business Phone No. 5. State of Incorporation RHODE ISLAND					02042
6. Brief Description of the Character To engage in the real estat	of Business Conducted in R	bode Island			
7. NAMES AND ADDRESSE President Name		("X" BOX FOR ATTA	ACHMENT) TELL IN SP Vice President Name CHARLOTTE A. YEO		FACHMENTS
Street Address			Street Address 201 FOREST AVENUE		
Сиу	State	Zip	City MIDDLETOWN	State RHODE ISLAND	^{Ζip} 02842
Secretary Name PATRICIA SARGENT			Treasurer Name ROBERT M. SABEL		
Street Address 201 FOREST AVENUE			Street Address 201 FOREST AVENUE		
MIDDLETOWN	State RHODE ISLANE		City MIDDLETOWN	State RHODE ISLAND	^{Zip} 02842
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name CHARLOTTE A. YEOMANS			FACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name PATRICIA SARGENT		
Street Address 201 FOREST AVENUE			Street Address 201 FOREST AVENUE		
MIDDLETOWN	State RHODE ISLAND	շւր 02842	City MIDDLETOWN	State RHODE ISLAND	<i>Σip</i> 02842
ROBERT M. SABEL			Director Name		••••••••••••
Street Address 201 FOREST AVENUE			Street Address		
MIDDLETOWN	State RHODE ISLAND	Zip 02842	City	State	Zip
9. 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 State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Pur Value
			100	COMMON	\$1.00
This report must be executed this report must be executed the	on behalf of the corpo	oration by an authorize ration by the receiver o	or trustee. Under penalty of perj	poration is in the hands of a ury, I declare and affirm that I panying schedules and statemen	have examined this repor
File Date Check No. Check No.			contained therein are to the signature Robert M. Sab	Talu 1/11	its, and that all statemen
Ву:О	10	_	Print or Type Name Treasurer		THE STATE OF THE S
FOR SECRETARY OF STA	TE USE ONLY		Title		