

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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(ccrd)) is subject to a penalty fee of \$25,00.

1. Corporate ID No. 2. Name of Corporation SI/VZPM, N.7. BAY ZNU					
8926 SILVZRMINZ BAY ZNU 3. Street Address Principal Business Office		City DRIVIOZNIO	State P2-	2ip 2906	
3. Street Address Principal Business Office 7. WIN 46/3 RD; 4. Business Phone No. 4. City PROVIDENCE RD; 5. State of Incorporation 4. City PROVIDENCE RD 5. State of Incorporation 4. City PROVIDENCE RD 6. Brief Description of the Character of Business Conducted in Rhode Island					
401-9653666 RHOOZ ISLAN)					
6. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF REAL ESTATE INVESTIGATION OF THE BUSINESS OF REAL ESTATE IN SPACES RECORD USING ATTACHMENTS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILE IN SPACES BEFORE CONTOUR TRACKMENT					
President Name LOLIS YIP			Vice President Name SAMZS		
Street Address 71 WINGER RD City PROVIDENCE State R2 24906			Street Address		
Gity Page 2011	State C-	Zip - Cd /	City	State	Zip
,	I K2	02700	Treasurer Name	.]	.]
SAMY			SAME		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Director Name					
Street Address			Street Address		
Service Treat and				<u> </u>	20 38
City	State	Zip	City	State	20
Director Name			Director Name		
Street Address			Street Address		
Street Autress					
City	State	Zip	City	State	A SECTION AND A
9. SHARES AUTHORIZED	ı	1	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
			ISSUED SHARES — THIS SECTION Number of Shares	Class/Series	Par Value
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.				0	NOPAR
			100	Common	100 181
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.					
this report must be executed on behalf of the corporation by the receiver of district.					
Under penalty of perjury, I declare and affirm that I have examined this repo including any ac∉ompanying schedules and statements, and that all stateme					
File Datecontained her					4/6/11
Check No. APR 12 2011 Check No. APR 12 2011					
Print or Type Name					
PRZS. DZNT					
Title					Form 630 Rev. 08/08