



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

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.

ANNUAL REPORT YEAR: 2010

1. ID No. 000314640

2. Exact Name of the Limited Liability Company LINK TRANSLATIONS LLC

3. State of Formation

State: RI

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

My LLC has no employees. I created this entity to manage the finances of my professional activity. I am a certified French/English translator and I provide translation services to my customers. (More than 99% of my income related to this activity is derived from customers that are located outside of RI, but I perform the translation services at my home in RI.)

5. Principal Office Address

No. and Street: 1117 DOUGLAS AVENUE, UNIT 307

City or Town: NORTH PROVIDENCE

State: RI Zip: 02904 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 1117 DOUGLAS AVENUE, UNIT 307

City or Town: NORTH PROVIDENCE

State: RI Zip: 02904 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

TRISTANE THEISEN 1117 DOUGLAS AVENUE, UNIT 307 NORTH PROVIDENCE , RI 02904

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 27 Day of May, 2011 at 2:17:29 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By TRISTANE B THEISEN
Signature of Authorized Person

Form No. 632
Revised 09/07

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