

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 0290+2615

Phone: (401) 222-3040 - Email: corporations@sos.ri.gov - Website: www.sos.ri.gov

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.	2. Exact name of the limited liability company					
000522408	G and G	G and G Investments LLC				
3. State of Formation	4. Brief descript	Brief description of the character of business conducted in Rhode Island				
RI	Real es	Real estate property				
5. Principal office address 126 Butler			City Quincy	State MA	Zip 02169	
	LIMITED LIABILITY C	OMPANY AND NAME	OR TITLE OF CONTACT PE	RSON:		
Contact Name George Pepdjonovic			Contact Title Manager			
Street Address 126 Butler Road			City Quincy	State MA	Zip 02169	
LIST <u>ALL</u> MANAGERS (N ("X" BOX FOR ATTACHN	NAMES AND ADDRE	SSES) OF THE LIMITI	ED LIABILITY COMPANY, IF	APPLICABLE - DO NO	T LIST MEMBERS	
Manager Name Ghia Griess			Manager Name George Pepdjonovic			
Street Address 126 Butler Road			Street Address 126 Butler Road			
<sup>City</sup> Quincy	State MA	<sup>Zip</sup> 02169	<sup>City</sup> Quincy	State MA	Zip 02169	
Manager Name		•	Manager Name			
Street Address	<del></del>		Street Address		<del></del>	
Dity	State	Zip	City	State	Zip	
B. RESIDENT AGENT IN RH	IODE ISLAND		in II. Para da esta en la esta de esta en esta en esta en			
	Control of the contro	fice of the Secretary	of State. Changes require fi	ling Form 642.		
				<del></del>	2012	
FILED C					SEP	
riL.	LU				28	
רבת מ	0.0010					
	8 2012				3	
By Cu 179	1982 1:0	6				
D1	,,,,	•			06	
			Under penalty of perju	ry, I declare and affirm	that I have examine	
File Date			this report, including any accompanying schedules and stateme and that all statements contained herein are true and correct.			
Check No			1 my L	Don	_ ~ 9/29	
By			Signature of Authorized	Preson	Pate	

Form No. 632 Revised: 01/2012

FOR SECRETARY OF STATE USE ONLY