RALPH MOLL SI	tate of Rhode Island a Office of the				ons Fee: \$50	0.00
Secretary of State	Providence	. River Str	eet 1-26			
Limited Liability Com Annual Report Filing Period: September 1	. ,					
In accordance with R.I.G.L. to file its annual report within 16-66(b&c)) is subject to a p	n thirty (30) days after the t				7.	
ANNUAL REPORT YEAR:	<u>2012</u>					
1. ID No. <u>000153944</u>	Ł					
2. Exact Name of the Limited Liability Company XB Technologies, LLC						
3. State of Formation						
State: <u>RI</u>						
4. Brief Description of the Technology Solutions Pro				-	ed in Rhode Island	
5. Principal Office Addres	SS					
	7 EAST MAIN RD RTSMOUTH	State: <u>F</u>	<u> </u>	Zip: <u>02871</u>	Country: <u>USA</u>	
6. Mailing Address of Lin	nited Liability Company a	and Name	or Ti	tle of Contact F	Person:	
	^{Title:} <u>′ EAST MAIN RD</u> <u>TSMOUTH</u>	State: <u>R</u>	<u> </u>	Zip: <u>02871</u>	Country: <u>USA</u>	
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS						
Title	Individual Name				Iress	
	First, Middle, Last, Suff	ix	Ad	dress, City or Town,	State, Zip Code, Country	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11						
EVAN S. LEVISS, ESQ. 15 OLD BEACH ROAD, #2 NEWPORT, RI 02840-						
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).						

Signed this 22 Day of January, 2013 at 3:05:42 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 <u>KATHI GRAHAM</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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