

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

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.		me of the limited liab	oility company				
601674	Jacky S	Jacky's Realty III, LLC					
3. State of Formation	4. Brief des	Brief description of the character of business conducted in Rhode Island					
Rhode Island	Realty	Realty					
5. Principal office address 39 Riverview Avenue			City North Providence	State RI	Zip 02904		
	LIMITED LIABILE	Y COMPANY AND	NAME OF THE OF CONTACT PER	:0 0%			
Contact Name Kin Wah Ko			Contact Title Member				
Street Address 39 Riverview Avenue			City North Providence	State RI	Zip 02904		
7, LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF AR	PLICABLE - <u>DO</u>	NOTE ISTEMBARKS.		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
RESIDENTIAGENT IN R	HODE ISLAND						
This information is curren	tly of record in the	e Office of the Sec	retary of State. Changes require filin	g Form 642.	<u> </u>		
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FOR SECRETARY OF STATE USE ONLY

Form No. 632 Revised: 01/2012

Under penalty of	Lperjury, I declar	e and affirm that	I have examined
this report, in alu	ding any accomp	panying schedul	l I have examined les and statements
and that all state	ments contained	l herein are true	and correct.

Print or Type Name of Authorized Person