

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 2015

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. 796747	2. Exact na	2. Exact name of the limited liability company HAJ Tech Center LLC				
State of Formation Rhode Island	4. Brief des	Brief description of the character of business conducted in Rhode Island Development of Real Estate				
5. Principal office address 1414 Atwood Avenue			City Johnston	State RI	Zip 02919	
BAMAIIING/ADDRESS/OF	UMITED)LIABILI	TY COMPANY AND	NAME OF TITLE OF CONTACT	PERSON®		
Contact Name Alfred Carpionato			Contact Title Member			
Street Address 1414 Atwood Avenue			City Johnston	State	Zip 02919	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADI	ORESSES) OF THE	LIMITED LIABILITY COMPANY,		NOT/LIST MEMBER	
Manager Name			Manager Name			
Street Address			Street Address			
			Street Address			
City	State	Zip	Street Address City	State	Zip	
	State	Zip		State	Zip	
City Manager Name Street Address	State	Zip	City	State	Zip	
Manager Name Street Address	State	Zip	City Manager Name	State		
Manager Name Street Address City	State HODE ISLAND	Zip	City Manager Name Street Address	State	Zip	

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File Date	Under penalty of penjury, I declare and prirm that I have examined
Check No.	this report, including any accompanying schedules and statements, and that all spacements coptained herein are true and correct.
	1 /////////////////////////////////////
By:	Signature of Authorized Person Date
FOR SECRETARY OF STATE USE ONLY	Alfred Carpionato
그 교회에 가지 하게 되어 되었다면 하지만 그렇게 생활을 가셨다고 하다면 살아 이렇게 되었다.	Print or Type Name of Authorized Ferson

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Form No. 632 Revised: 01/2012