



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 140282		2. Exact name of the limited liability company Kidz Celebration Inflatables LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island The rental of children's party equipment	
5. Principal office address 754 Greenville Ave		City Johnston	State RI
		Zip 02919	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Thomas Durkin		Contact Title Owner/General Manager	
Street Address 754 Greenville Ave		City Johnston	State RI
		Zip 02919	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name Sheryl Durkin		Manager Name Thomas Durkin	
Street Address 754 Greenville Ave		Street Address 754 Greenville Ave	
City Johnston	State RI	City Johnston	State RI
Zip 02919		Zip 02919	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name THOMAS DURKIN		Address	
Address 754 GREENVILLE AVENUE		City JOHNSTON	Zip 02919

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



File Date	10/26/05	140282*
Check No.	111	
By:	[Signature]	
FOR SECRETARY OF STATE USE ONLY		

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Thomas Durkin **Oct 25, 2005**
Signature of Authorized Person Date
Thomas Durkin
Print or Type Name of Authorized Person