



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2015
RIS 222 (rev)

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2008

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

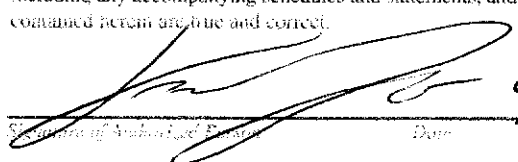
In accordance with R.I.G.L. 7-16-6(b), each limited liability company having to register to file its annual report with the state (see also provisions of the R.I.G.L. 7-16-6(b)(2)) is subject to a penalty fee of \$25.00.

| | | | |
|---|-------|---|--------------------|
| 1. Filing ID 143590 | | 2. Fiscal year of the limited liability company Jeep World Auto Sales & Service, LLC | |
| 3. State of the company RI | | 4. If filing the report for the first time, include the nature of the business Sell used cars | |
| 5. Principal office address 580 Killingly St. | | City Johnston | State RI |
| 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Vincenzo Pellegrino | | Contact Title Owner/sole member/president | |
| Street Address 12 Young Lane | | City Johnston | State RI |
| 7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILE IN SPACES BEFORE USING ATTACHMENTS (SEE BOX FOR ATTACHMENTS) <input type="checkbox"/> | | | |
| Manager Name N/A | | Manager Name | |
| Street Address | | Street Address | |
| City | State | Zip | City |
| City | State | Zip | City |
| City | State | Zip | City |
| 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes require filing of Form 592 - R.I.G.L. 7-16-11 | | | |
| Agent Name | | Agent Name | |
| Address | | Address | |
| City | | City | |
| State | | State | |
| Zip | | Zip | |

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-6(b).

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|---------------------------------|
| File Date 9-8-08 |
| Check No. 1138 |
| By: MMC |
| 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.


Signature of Authorized Person Date **9/4/08**

Vincenzo Pellegrino
Print or Type Name of Authorized Person