



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <u>121256</u>		2. Name of Corporation <u>BAN CHIANG, INC.</u>			
3. Street Address Principal Business Office <u>1050 WILLETTE AVE</u>			City <u>EAST PROVIDENCE</u>	State <u>RI</u>	Zip <u>02806</u>
4. Business Phone No. <u>433-0123</u>		5. State of Incorporation <u>RI</u>			
6. Brief Description of the Character of Business Conducted in Rhode Island <u>THAI RESTAURANT</u>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <u>PREECHTA NONNAPHA</u>			Vice President Name <u>PREECHTA NONNAPHA</u>		
Street Address <u>84 WASHINGTON RD.</u>			Street Address <u>84 WASHINGTON RD</u>		
City <u>BARRINGTON</u>	State <u>RI</u>	Zip <u>02806</u>	City <u>BARRINGTON</u>	State <u>RI</u>	Zip <u>02806</u>
Secretary Name <u>SAME ONE</u>			Treasurer Name <u>SAME ONE</u>		
Street Address <u>SAME ABOVE</u>			Street Address <u>SAME ABOVE</u>		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <u>PREECHTA NONNAPHA</u>			Director Name <u>PREECHTA NONNAPHA</u>		
Street Address <u>84 WASHINGTON RD.</u>			Street Address <u>84 WASHINGTON RD.</u>		
City <u>BARRINGTON</u>	State <u>RI</u>	Zip <u>02806</u>	City	State	Zip
Director Name <u>PREECHTA NONNAPHA</u>			Director Name <u>PREECHTA NONNAPHA</u>		
Street Address <u>84 WASHINGTON RD.</u>			Street Address <u>84 WASHINGTON RD.</u>		
City <u>BARRINGTON</u>	State <u>RI</u>	Zip <u>02806</u>	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares <u>100</u>	Class/Series	Par Value <u>0</u>	Number of Shares <u>1</u>	Class/Series	Par Value <u>NON</u>
THIS SECTION MUST BE COMPLETED					

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CORPORATIONS DIV
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This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

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: P. Nanny Date: 2/28/08
Print or Type Name: PREECHTA NONNAPHA
Title: PRESIDENT / OWNER

FILED

File Date: FEB 29 2008

Check No. 3329

By: [Signature]

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