



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 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

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. 89405		2. Name of Corporation New to Kyo, Inc.		
3. Street Address Principal Business Office 388 Wickenden Street		City Providence	State RI	Zip 02903
4. Business Phone No. 401-621-7048		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Japanese Restaurant				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Liya Lao		Vice President Name Liya Lao		
Street Address 186 Sleepy Hollow Farm		Street Address 186 Sleepy Hollow Farm		
City Warwick	State RI	Zip 02886	City Warwick	State RI
Secretary Name Liya Lao		Treasurer Name Liya Lao		
Street Address 186 Sleepy Hollow Farm		Street Address 186 Sleepy Hollow Farm		
City Warwick	State RI	Zip 02886	City Warwick	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Liya Lao		Director Name		
Street Address 186 Sleepy Hollow Farm		Street Address		
City Warwick	State RI	Zip 02886	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED 100 Common No Par				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐				
ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
Number of Shares 100		Class/Series Common		Par Value No Par
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.				

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.

FILED

OCT 19 2009

By

File Date

Check No.

By:

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

Date

Liya Lao

Print or Type Name

President

Title