

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 2011

401.222.30

Filling Period: January 1 - March 1 • Filling 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(e)d) is thing to a standard for a first 500.

| subject to a penalty fee of \$25.00.   |   |  |  | •                          |  |  |
|--|---|--|--|----------------------------|--|--|
| 1. Corporate ID No.<br>530467  | 2. Name of Corporation<br>Best Eastern Ch | 2. Name of Corporation Best Eastern Chinese Restaurant, Inc. |  |                            |  |  |
| 3. Street Address Principal Business Office<br>773-791 Lonsdale Avenue   |   |  | стр<br>Central Falls   | State<br>RI                | <i>Ζip</i><br>02863  |  |
| 4. Business Phone No. 5. State of Incorporation Rhode Island   |   |  |  |                            | 02000  |  |
| 6. Brief Description of the Character Operation of a restaurant  | of Business Conducted in F                | Rhode Island   |  |                            |  |  |
| 7. NAMES AND ADDRESSES   | OF THE OFFICERS:                          | ("X" BOX FOR ATT   | ACHMENT)   FILL IN SP  | ACES BEFORE USING          | G ATTACHMENTS  |  |
| President Name Linn Chen   |   |  | Vice President Name  |                            |  |  |
| Street Address   |   |  | Li Hua Chen Street Address   |                            |  |  |
| 773 Lonsdale Avenue  |   |  | 773 Lonsdale Avenue  |                            |  |  |
| City<br>Central Falls  | State<br>RI                               | <sup>Zip</sup><br>02863                                      | City<br>Central Falls  | State<br>RI                | <sup>Zip</sup><br>02863  |  |
| Secretary Name Linn Chen   |   |  | Treasurer Name<br>Linn Chen  |                            |  |  |
| 5treet Address 773 Lonsdale Avenue   |   |  | Street Address<br>773 Lonsdale Avenue  |                            |  |  |
| Central Falls  | State<br>RI                               | <sup>Zip</sup><br>02863 -                                    | City<br>Central Falls  | State<br>RI                | <sup>zφ</sup><br>02863   |  |
| 3. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR AT Director Name  Linn Chen  |   |  | TACHMENT) THE FILL IN SPACES BEFORE USING ATTACHMENTS  Director Name  Li Hua Chen            |                            |  |  |
| Greet Address  |   |  | Street Address   |                            |  |  |
| 73 Lonsdale Avenue   |   |  | 773 Lonsdale Avenue  |                            |  |  |
| Central Falls  | State<br>RI                               | <sup>Zip</sup><br>02863                                      | City Central Falls Director Name   | State<br>RI                | <i>z</i> φ<br>02863  |  |
| reet Address   |   |  |  |                            |  |  |
|  |   |  | Street Address   |                            |  |  |
| itv  | State                                     | Zip  | City   | State                      | Zip  |  |
| SHARES AUTHORIZED  |   |  | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION MUST BE COMPLETED   |                            |  |  |
| 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. |   |  | Number of Shares   | Class/Series               | Par Value  |  |
|  |   |  | 200  | Common                     | No Par   |  |
|  |   |  | 4. V 19 19 19 19 19 19 19 19 19 19 19 19 19  |                            | A CONTRACTOR   |  |
| his report must be executed on is report must be executed on let Date    APR 0 1 20  | behalf of the corpora                     | uion by the receiver of                                      | Under penalty of perjurincluding any accompar contained herein are tru  Signature  Linn Chen | y, I declare and affirm th | nat I have examined this repo<br>ements, and that all statements |  |
| BY FOR SECRETARY OF STATE  | - V                                       |  | Print or Type Name  President  |                            |  |  |
| The state of states  |   | MIT SIN T  | Title  |                            | F. (00 P. (0002  |  |