



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 02904-261
401.222.304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

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. 000127266	2. Name of Corporation WL ENTERPRISE, INC / TIN TSIN CHINESE RESTAURANT
----------------------------------	--

3. Street Address Principal Business Office 400 PUTNAM PIKE STE K	City SMITHFIELD	State RI	Zip 02917
--	--------------------	-------------	--------------

4. Business Phone No. 401-233-0888	5. State of Incorporation RHODE ISLAND
---------------------------------------	---

6. Brief Description of the Character of Business Conducted in Rhode Island
RESTAURANT

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name XIU LUAN LIN	Vice President Name TAN PING WANG
Street Address 400 PUTNAM PIKE STE K	Street Address 400 PUTNAM PIKE STE K
City SMITHFIELD	City SMITHFIELD
State RI	State RI
Zip 02917	Zip 02917
Secretary Name	Treasurer Name

Street Address	Street Address
City	City
State	State
Zip	Zip

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name NONE	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
1000	COMMON	NO PAR

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

File Date JAN 09 2012

Check No. By MNC

By: 2794

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.

X Xiu Luan Lin 1/16/12

Signature Date

XIU LUAN LIN

Print or Type Name

PRESIDENT

Title