



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 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. 000613245		2. Name of Corporation Rittipa Corporation			
3. Street Address Principal Business Office 50 Ella Ave			City Woonsocket	State RI	Zip 02895
4. Business Phone No. (401) 284 4370		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Thai Restaurant					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Zak Luangaphay			Vice President Name Zak Luangaphay		
Street Address 115 North Main St Apt# 204			Street Address 115 North Main St Apt# 204		
City Bellingham	State MA	Zip 02019	City Blackstone	State MA	Zip 02019
Secretary Name Benchamas Saengpim			Treasurer Name Zak Luangaphay		
Street Address 50 Ella Ave			Street Address 115 North Main St Apt# 204		
City Woonsocket	State RI	Zip 02895	City Bellingham	State MA	Zip 02019
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			0		

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 19 2012
Check No.	10/30
By:	<u>BY</u>
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: Zak Luangaphay Date: 1/8/12
Print or Type Name: Zak Luangaphay
Title: President