



Office of the Secretary of State

148 W. River Street
Providence, RI 02904-2611
401.222.3041

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. 40329 | | 2. Name of Corporation KING'S GARDEN RESTAURANT INC | | | |
| 3. Street Address Principal Business Office 90 ROLFE STREET | | | City CRANSTON | State RI | Zip 02920 |
| 4. Business Phone No. 401461-0646 | | 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) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name DAVID KWONG | | | Vice President Name CHOW HA KWONG | | |
| Street Address 21 DAISY COURT | | | Street Address 21 DAISY COURT | | |
| City CRANSTON | State RI | Zip 02920 | City CRANSTON | State RI | Zip 02920 |
| Secretary Name DAVID KWONG | | | Treasurer Name CHOW HA KWONG | | |
| Street Address SAME | | | Street Address SAME | | |
| 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 | | | 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 |
| | | | 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 FEB 01 2012
 Check No. By [Signature]
 By: 7392

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] 1/23/12
 Signature Date
DAVID KWONG
 Print or Type Name
PRESIDENT