

** Final Return due to business closed **



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molis, 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. 000562904		2. Name of Corporation GOLDEN HOUSE, INC.	
3. Street Address Principal Business Office 606 METACOM AVE. UNIT 3		City WARREN	State RI
		Zip 02885	
4. Business Phone No. 401-245-2883		5. State of Incorporation Rhode Island State	
6. Brief Description of the Character of Business Conducted in Rhode Island Restaurant			
7. NAMES AND ADDRESSES OF THE OFFICERS (SEE BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name KE, XIUFANG		Vice President Name GE, CAIFANG	
Street Address 606 METACOM AVE. UNIT 3		Street Address 606 METACOM AVE. UNIT 3	
City WARREN	State RI	Zip 02885	City WARREN
			State RI
			Zip 02885
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS (SEE BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name KE, XIUFANG		Director Name GE, CAIFANG	
Street Address 606 METACOM AVE. UNIT 3		Street Address 606 METACOM AVE. UNIT 3	
City WARREN	State RI	Zip 02885	City WARREN
			State RI
			Zip 02885
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
9. SHARES AUTHORIZED			
200.00		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 200.00	Class/Series CNP
			Pur Value 0.00
		THIS SECTION MUST BE COMPLETED	

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

MAR 01 2012

By MME

CKH 161

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 KE XIU FANG ✓ 2.29.12
Signature Date

KE XIU FANG

Print or Type Name

Title

File Date
Check No.
By
FOR SECRETARY OF STATE USE ONLY