

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 · This report must be typed or printed legibly.

		FILE THIS REPORT BY N	IARCH 31 WILL RE	SULT IN A \$25.00 PEN	ALTY FEE.
1, Entity ID No.	ı	ame of the Corporation	TD		
69870	CHAN	RESTAURANT, L	ID.		
3. Principal office address 1111 ATWELLS AVENUE			City PROVIDENCE	State RI	Zip 02909
4. Business Phone No. 401-453-3133			5. State of Incorporation RHODE ISLAND		
6. Brief description of the char BUSINESS OF A RES				N FOOD	
// List all officers (NA	IES AND ADD	RESSES) ("X" BOX FOR A	IE ACHMENT,		
President Name MICHAEL CHAN Street Address 37 STEEPLE LANE			Vice-President Name MICHAEL CHAN Street Address 37 STEEPLE LANE		
Secretary Name			Treasurer Name	,	
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. LIST ALL DIRECTORS (N	AMES AND AD	DRESSES) ("X" BOX FOR	ATTACHMENT)		
Director Name			Director Name		and the letter plane that New York Art passage and a William
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 ISSUEI	O ("X" BOX FOR ATTAC	MENT)
This information is accordant.	_4	- OMI 1 41 O	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.			100	COMMON	NO PAR VALUE
See Section 9 of Instruction 8	sheet.				
This report must be executed					s of a receiver or trustee,
File Date	tnis report mi	ust be executed on behalf of FILED	Under penalty of p	erjury, I declare and affi	rm that I have examined chedules and statements,
heck No. FEB 2 1 2013			and that all statements contained herein are true and correct.		
	BY	8591	Signature of Author	ized Representative	Date
FOR SECRETARY OF STATE USE ONLY			MICHAEL CHAN		

FILED	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.
Greck No. FEB 2 1 2013	MUKMUSI 1/31/13
BY STAIL	Signature of Authorized Representative Date
FOR SECRETARY OF STATE USE ONLY	MICHAEL CHAN

Form No. 630 Revised: 01/2012