



**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 2016**

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

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>437664</b>		2. Exact name of the Corporation <b>YOUNG LAU REAL ESTATE COMPANY</b>			
3. Principal office address <b>1172 MAIN STREET</b>			City <b>RICHMOND</b>	State <b>RI</b>	Zip <b>02898</b>
4. Business Phone No. <b>(401) 539-9060</b>			5. State of Incorporation <b>RHODE ISLAND</b>		
6. Brief description of the character of business conducted in Rhode Island <b>ALL TRANSACTIONS RELATED TO PURCHASE, SALE AND OWNERSHIP OF REAL ESTATE &amp; FOR ALL OTHER LAWFUL PURPOSES</b>					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>YING CHONG YOUNG</b>			Vice-President Name <b>LU BIN WU</b>		
Street Address <b>14 SUNRISE DRIVE</b>			Street Address <b>19A SUNRISE DRIVE</b>		
City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>
Secretary Name <b>JIN YANG YU</b>			Treasurer Name <b>SAU SHEUNG LAU</b>		
Street Address <b>19B SUNRISE DRIVE</b>			Street Address <b>10 SUNRISE DRIVE</b>		
City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>YING CHONG YOUNG</b>			Director Name <b>SAU SHEUNG LAU</b>		
Street Address <b>14 SUNRISE DRIVE</b>			Street Address <b>10 SUNRISE DRIVE</b>		
City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>
Director Name <b>JIN YANG YU</b>			Director Name <b>LU BIN WU</b>		
Street Address <b>19B SUNRISE DRIVE</b>			Street Address <b>19A SUNRISE DRIVE</b>		
City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			200	COMMON	NONE

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.

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

**FILED**  
 JAN 21 2016  
 HCL 1090

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.

*Ying Chong Young*  
 Signature of Authorized Representative

*Jan 16, 2016*  
 Date

**YING CHONG YOUNG**

Print or Type Name of Authorized Representative