

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.	2. Exact na	ime of the Corporation					
437664	YOUN	YOUNG LAU REAL ESTATE COMPANY					
Principal office address 1172 MAIN STREET			City RICHMOND	State RI	Zip 02898		
4. Business Phone No. (401) 539-9060			5. State of Incorporation RHODE ISLAND				
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resident Name YING CHONG YOUNG			Vice-President Name LU BIN WU				
Street Address 14 SUNRISE DRIVE			Street Address 19A SUNRISE DRIVE				
City WESTERLY	State RI	Zip 02891	City WESTERLY	State RI	Zip 02891		
Secretary Name JIN YANG YU	•			Treasurer Name SAU SHEUNG LAU			
Street Address 19B SUNRISE DRIVE			Street Address 10 SUNRISE DRIVE				
WESTERLY	State RI	Zip 02891	City WESTERLY	State RI	Zip 02891		
	NAMES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT)	2.20	AN ARCHE		
Pirector Name YING CHONG YOUNG			Director Name SAU SHEUNG LAU				
Street Address 14 SUNRISE DRIVE			Street Address 10 SUNRISE DE	RIVE	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
City WESTERLY	State RI	Zip 02891	City WESTERLY	State RI	Zip 02891		
Pirector Name JIN YANG YU				Director Name LU BIN WU			
treet Address 19B SUNRISE DRIVE			Street Address 19A SUNRISE DRIVE				
ity WESTERLY	State RI	Zip 02891	City WESTERLY	State RI	Zip 02891		
SHARES AUTHORIZED			10. SHARES ISSUEL	LUX BOX FOR AT	TACHMENT)		
nis information is currently of record in the Office of the Secretary State. Changes require an additional filing. se Section 9 of Instruction sheet.		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE			
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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 of Authorized Representative

1<u>an. 16, 2</u>016 Date

YING CHONG YOUNG

Print or Type Name of Authorized Representative

Form No. 630 Revised: 01/2012