

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

2016 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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.

rining ree. \$50.00			ALIGH OF MEETIES			
1. Entity ID No.		2. Exact name of the Corporation				
41709	YOUNG	YOUNG LAU, INC.				
3. 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			
6. Brief description of the OPERATION OF A		s conducted in Rhode Island	1			
	NAMES AND ADDR	ESSES) ("X" BOX FOR A				
President 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			
City WESTERLY	State RI	Zip 02891	City WESTERLY	State RI	Zip 02891	
8. LISTALL DIRECTORS	NAMES AND ADD	RESSES) (*X! BOX FOR	ATTACHMENTE	Verification 13	是	
Director Name YING CHONG YOUNG			Director Name SAU SHEUNG LAU			
Street Address 14 SUNRISE DRIVE			Street Address 10 SUNRISE DRIVE			
City WESTERLY	State RI	Zip 02891	City State RI		Zip 02891	
Director Name JIN YANG YU			Director Name LU BIN WU			
Street Address 19B SUNRISE DRIVE			Street Address 19A SUNRISE DRIVE			
City WESTERLY	State RI	Zip 02891	City State RI		Zip 02891	
SHARES AUTHORIZED			10. SHARES (SSUED ("X" BOX FOR ATTACHMENT)			
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
			280	COMMON	NONE	
This report must be exec	uted on behalf of the	corporation by an authorize	ed representative. If the	l 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

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

16, 2016 Date

YING CHONG YOUNG

Print or Type Name of Authorized Representative

Form No. 630 Revised: 01/2012

ATTACHMENT TO 2016 ANNUAL REPORT FOR YOUNG LAU, INC.

CORPORATE ID# 41709

Names and addresses for all other directors or board members:

Leo Lau 10 Sunrise Drive, Westerly, RI 02891