



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2017**
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 81359		2. Exact name of the Corporation Kwong Dynasty, Inc.			
3. Principal Office Address 80 Lambert Lind Highway			City Warwick	State RI	Zip 02886
4. NAICS Code 72 - Accommodation and Food		6. Brief description of the character of business conducted in Rhode Island Operation of a full service restaurant			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name YUI Bun Kwong			Vice-President Name Jenny Kwong		
Street Address 101 Rutland Street			Street Address 101 Rutland Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Jenny Kwong			Treasurer Name Yui Bun Kwong		
Street Address 101 Rutland Street			Street Address 101 Rutland Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Jenny Kwong			Director Name Yui Bun Kwong		
Street Address 101 Rutland Street			Street Address 101 Rutland Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
11. 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. 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.					
Name of Authorized Representative Jenny Kwong					Date
Signature of Authorized Representative					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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