



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 4077		2. Exact name of the Corporation Chen's Restaurant Inc			
3. Principal Office Address 60 Old Tower Hill Rd			City Wakefield	State RI	Zip 02879
4. NAICS Code 72		6. Brief description of the character of business conducted in Rhode Island Ownership and operation of Chinese restaurant			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment					
President Name Leo C.K. Lau			Vice-President Name Jack Chen		
Street Address 10 Sunrise Drive			Street Address 309 South Rd		
City Westerly	State RI	Zip 02891	City Wakefield	State RI	Zip 02879
Secretary Name Leo C.K. Lau			Treasurer Name Jack Chen		
Street Address 10 Sunrise Drive			Street Address 309 South Rd.		
City Westerly	State RI	Zip 02891	City Wakefield	State RI	Zip 02879
8. List ALL directors (names and addresses) Check the box to indicate an attachment					
Director Name Chung Ful Lau			Director Name George Chen		
Street Address 10 Church St			Street Address 408 Golden Harvest Loop		
City Westerly	State RI	Zip 02891	City Cary	State NC	Zip 27519
Director Name Tse Cheung Lau			Director Name		
Street Address 8 Raymond St.			Street Address		
City Westerly	State RI	Zip 02891	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
		200		CLASS A COMMON	\$10.00
		300		CLASS B COMMON	\$10.00
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 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 Jack Chen				Date 2/25/17	
Signature of Authorized Representative Jack Chen					

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

BY HPD/DS