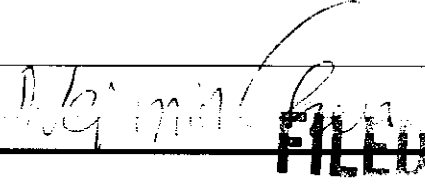




State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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 150707		2. Exact name of the Corporation The Lucky Chen's Corp.		
3. Principal Office Address 609 Smithfield Avenue		City Lincoln	State RI	Zip 02865
4. NAICS Code 81 - Other Services (except Pul	6. Brief description of the character of business conducted in Rhode Island Operating a restaurant.			
5. State of Incorporation Rhode Island				
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐				
President Name Suzan Chen		Vice-President Name Michael Chen		
Street Address 118 Massachusetts Avenue		Street Address 118 Massachusetts Avenue		
City Providence	State RI	Zip 02905	City Providence	State RI
Secretary Name Weimin Chen		Treasurer Name Weimin Chen		
Street Address 118 Massachusetts Avenue		Street Address 118 Massachusetts Avenue		
City Providence	State RI	Zip 02905	City Providence	State RI
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. Shares Authorized Check the box to indicate an attachment ☐				
This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment ☐		
		NUMBER OF SHARES CLASS/SERIES PAR VALUE		
		300	Common	No 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 Weimin Chen, Secretary			Date 2/ /2017	
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

FILED
MAR 01 2017
BY 1805 DS