



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

Annual Report for the year: 2016
Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

2017
 MAY 25
 AM 10:45
 RI
 STATE

1. Entity ID Number <u>610005</u>		2. Exact name of the Corporation <u>New Gold House Inc</u>			
3. Principal Office Address <u>569 Warren Ave</u>		City <u>E. Providence</u>	State <u>RI</u>	Zip <u>02014</u>	
4. NAICS Code <u>72-Accommodation and Food</u>	6. Brief description of the character of business conducted in Rhode Island <u>Restaurant</u>				
5. State of Incorporation <u>RI</u>					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name <u>Zu Hao Yang</u>		Vice-President Name			
Street Address <u>569 Warren Ave</u>		Street Address			
City <u>E. Providence</u>	State <u>RI</u>	Zip <u>02014</u>	City	State	Zip
Secretary Name		Treasurer Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. Shares Authorized 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 <input type="checkbox"/>			
		NUMBER OF SHARES <u>200</u>	CLASS/SERIES <u>STK</u>	PAR VALUE <u>0</u>	
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 <u>Zu Hao Yang</u>				Date <u>5-25-17</u>	
Signature of Authorized Representative <u>Zu hao Yang</u>					

FILED
MAY 25 2017
 BY 304523
A.A. 10:47 A.M.