



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

Annual Report for the year: **2018**
Corporation

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

FILED
FEB 23 2018
BY 36049

1. Entity ID Number 88725		2. Exact name of the Corporation 47 WEST 14TH ST. CORP.			
3. Principal Office Address 375 THAMES STREET		City NEWPORT		State RI	Zip 02840
4. NAICS Code 531390		6. Brief description of the character of business conducted in Rhode Island PURCHASE, LEASE, EXCHANGE OR OTHERWISE ACQUIRE REAL ESTATE.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name YEH JONG SON			Vice-President Name STEVEN G. CUNDY		
Street Address 375 THAMES STREET			Street Address 375 THAMES STREET		
City NEWPORT	State RI	Zip 02840	City NEWPORT	State RI	Zip 02840
Secretary Name LAHNA SON-CUNDY			Treasurer Name YEH JONG SON		
Street Address 375 THAMES STREET			Street Address 375 THAMES STREET		
City NEWPORT	State RI	Zip 02840	City NEWPORT	State RI	Zip 02840
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name STEVEN G. CUNDY			Director Name NONE		
Street Address 375 THAMES STREET			Street Address		
City NEWPORT	State RI	Zip 02840	City	State	Zip
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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			
		200	COMMON	NO PAR	
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 YEH JONG SON					Date 1/29/18
Signature of Authorized Representative 					