



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

Annual Report for the year:

Non-Profit Corporation

2017

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

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SECRETARY OF STATE
CORPORATION
2018 MAR - 7 PM 4:38

1. Entity ID Number 1451903		2. Exact name of the Corporation Korean American Business Commerce Assn RI	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island To provide a business vehicle for which the interest of the Korean Community is best served	
4. NAICS Code 813910			
6. Principal Office Address PO Box 515		City W. Kingston	State RI
		Zip 02892	
7. List ALL officers (names and addresses) <input type="checkbox"/> Check the box to indicate an attachment			
President Name Angela K. Sharkey		Vice-President Name	
Street Address PO Box 515		Street Address	
City W. Kingston	State RI	Zip 02892	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <input type="checkbox"/> Check the box to indicate an attachment			
Director Name Angela K. Sharkey		Director Name Dang Soo Lee	
Street Address PO Box 515		Street Address 592 Charles St	
City W. Kingston	State RI	Zip 02892	City Providence
Director Name Yea-Mo Yang		Director Name	
Street Address 58 Wabum Ave		Street Address	
City Providence	State RI	Zip 02808	
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
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.			
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.			
Name of Officer/Authorized Representative Angela K. Sharkey		Date 3/7/18	
Signature of Officer/Authorized Representative Angela K. Sharkey		MAR 07 2018 BY 326124 4:38	

MAIL TO:
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