



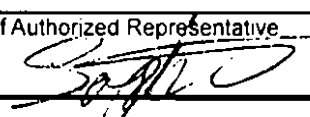
State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS STAMP  
2018 MAR 30 PM 12:32

**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.

1. Entity ID Number <b>136956</b>		2. Exact name of the Corporation <b>APSARA PALACE, INC.</b>	
3. Principal Office Address <b>1441 Park Avenue</b>		City <b>Cranston</b>	State <b>RI</b>
		Zip <b>02920</b>	
4. NAICS Code <b>722511</b>	6. Brief description of the character of business conducted in Rhode Island <b>Deal in restaurants, taverns, cafes', cafeterias, grills, diners, delicatessens, lunch rooms, coffee shops, luncheonettes and kitchens.</b>		
5. State of Incorporation <b>Rhode Island</b>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>Sophal Sok</b>		Vice-President Name <b>Sophal Sok</b>	
Street Address <b>24 Paine Avenue</b>		Street Address <b>24 Paine Avenue</b>	
City <b>Cranston</b>	State <b>RI</b>	City <b>Cranston</b>	State <b>RI</b>
Zip <b>02910</b>		Zip <b>02910</b>	
Secretary Name <b>Sophal Sok</b>		Treasurer Name <b>Sophal Sok</b>	
Street Address <b>24 Paine Avenue</b>		Street Address <b>24 Paine Avenue</b>	
City <b>Cranston</b>	State <b>RI</b>	City <b>Cranston</b>	State <b>RI</b>
Zip <b>02910</b>		Zip <b>02910</b>	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>Sophal Sok</b>		Director Name <b>None</b>	
Street Address <b>24 Paine Avenue</b>		Street Address	
City <b>Cranston</b>	State <b>RI</b>	City	State
Zip <b>02910</b>		Zip	
Director Name <b>None</b>		Director Name <b>None</b>	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES	
		CLASS/SERIES	
		PAR VALUE	
		<b>100</b>	<b>Common</b>
			<b>No Par Value</b>
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. <i>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.</i>			
Name of Authorized Representative <b>Sophal Sok</b>		Date <b>3/30/18</b>	
Signature of Authorized Representative 			

**FILED**  
SIGN DOCUMENT HERE

MAR 30 2018

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