

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

FILED

Annual Report for the year: 2019  
Corporation

DEC 31 2018

BY DOC 10803

- 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<br><u>000126601</u>                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                               | 2. Exact name of the Corporation<br><u>Haruki East LTD</u>                                                            |                              |
| 3. Principal Office Address<br><u>1210 Oaklawn ave</u>                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                               | City<br><u>Cranston</u>                                                                                               | State<br><u>RI</u>           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                               | Zip<br><u>02920</u>                                                                                                   |                              |
| 4. NAICS Code<br><u>722511</u>                                                                                                                                                                                                                                                                                                                                                                                                                                   | 6. Brief description of the character of business conducted in Rhode Island<br><u>Full Service Restaurant</u> |                                                                                                                       |                              |
| 5. State of Incorporation<br><u>RI</u>                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                               |                                                                                                                       |                              |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                                                                                                                                                                                                                                   |                                                                                                               |                                                                                                                       |                              |
| President Name<br><u>Haruki Kibe</u>                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                               | Vice-President Name                                                                                                   |                              |
| Street Address<br><u>6 Chamberlain CT</u>                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                               | Street Address                                                                                                        |                              |
| City<br><u>N. Smithfield</u>                                                                                                                                                                                                                                                                                                                                                                                                                                     | State<br><u>RI</u>                                                                                            | Zip<br><u>02896</u>                                                                                                   |                              |
| Secretary Name<br><u>Vilayphone Kibe</u>                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                               | Treasurer Name<br><u>Haruki Kibe</u>                                                                                  |                              |
| Street Address<br><u>6 Chamberlain CT</u>                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                               | Street Address<br><u>6 Chamberlain CT</u>                                                                             |                              |
| City<br><u>N. Smithfield</u>                                                                                                                                                                                                                                                                                                                                                                                                                                     | State<br><u>RI</u>                                                                                            | Zip<br><u>02896</u>                                                                                                   | City<br><u>N. Smithfield</u> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                               |                                                                                                                       | State<br><u>RI</u>           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                               |                                                                                                                       | Zip<br><u>02896</u>          |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                                                                                                                                                                                                                                  |                                                                                                               |                                                                                                                       |                              |
| Director Name<br><u>Haruki Kibe</u>                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                               | Director Name                                                                                                         |                              |
| Street Address<br><u>6 Chamberlain CT</u>                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                               | Street Address                                                                                                        |                              |
| City<br><u>N. Smithfield</u>                                                                                                                                                                                                                                                                                                                                                                                                                                     | State<br><u>RI</u>                                                                                            | Zip<br><u>02896</u>                                                                                                   |                              |
| Director Name                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                               | Director Name                                                                                                         |                              |
| Street Address                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                               | Street Address                                                                                                        |                              |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                             | State                                                                                                         | 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.<br><br>Changes require an additional filing.                                                                                                                                                                                                                                                                                                                                                 |                                                                                                               | NUMBER OF SHARES                                                                                                      |                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                               | CLASS/SERIES                                                                                                          |                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                               | PAR VALUE                                                                                                             |                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                               | <u>100</u>                                                                                                            | <u>Common</u>                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                               |                                                                                                                       | <u>10 PV</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.<br><b>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.</b> |                                                                                                               |                                                                                                                       |                              |
| Name of Authorized Representative<br><u>Haruki Kibe</u>                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                               | Date<br><u>12.19.18</u>                                                                                               |                              |
| Signature of Authorized Representative<br><u>Haruki Kibe</u>                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                               |                                                                                                                       |                              |