



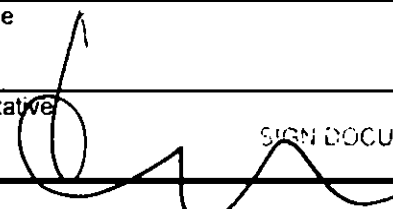
State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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R.I. DEPT. OF STATE
BUS. SVCS. DIV.
2020 FEB 11 P 12:02


Annual Report for the year: **2020**
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 796249		2. Exact name of the Corporation Unisource International Development and Construction			
3. Principal Office Address 521 Roosevelt Ave			City Central Falls	State RI	Zip 02863
4. NAICS Code 53110		6. Brief description of the character of business conducted in Rhode Island To engage in the business of real estate development and construction			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Tze Ping Ng			Vice-President Name Tze Ping Ng		
Street Address 76 Middle Rd			Street Address 76 Middle Rd		
City East Greenwich	State RI	Zip 02818	City Providence	State RI	Zip 02818
Secretary Name Louis Yip			Treasurer Name Louis Yip		
Street Address 71 Wingate Rd			Street Address 71 Wingate Rd		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
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			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			1000	CNP	No value
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 Louis Yip					Date 1/20/2020
Signature of Authorized Representative 					

SIGN DOCUMENT HERE

FILED

FEB 11 2020
BY  2238
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