



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2021

## 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 STAMP

FEB 19 2021

BY

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|                                                                                                                                                                                                                                                   |             |                                                                                                                                |                                                                                                                       |                 |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|-----------------|--------------|
| 1. Entity ID Number<br>55299                                                                                                                                                                                                                      |             | 2. Exact name of the Corporation<br>LUCKY HOUSE RESTAURANT, INC.                                                               |                                                                                                                       |                 |              |
| 3. Principal Office Address<br>32 MAIN STREET                                                                                                                                                                                                     |             |                                                                                                                                | City<br>ASHAWAY                                                                                                       | State<br>RI     | Zip<br>02804 |
| 4. NAICS Code<br>722511                                                                                                                                                                                                                           |             | 6. Brief description of the character of business conducted in Rhode Island<br>OWNERSHIP AND OPERATION OF A CHINESE RESTAURANT |                                                                                                                       |                 |              |
| 5. State of Incorporation<br>RHODE ISLAND                                                                                                                                                                                                         |             |                                                                                                                                |                                                                                                                       |                 |              |
| 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>DANNY JING RU ZENG                                                                                                                                                                                                              |             |                                                                                                                                | Vice-President Name<br>BRIEN BAI RU ZENG                                                                              |                 |              |
| Street Address<br>4 MILROSE AVENUE                                                                                                                                                                                                                |             |                                                                                                                                | Street Address<br>21 RAYMOND STREET                                                                                   |                 |              |
| City<br>WESTERLY                                                                                                                                                                                                                                  | State<br>RI | Zip<br>02891                                                                                                                   | City<br>WESTERLY                                                                                                      | State<br>RI     | Zip<br>02891 |
| Secretary Name<br>DANNY JING RU ZENG                                                                                                                                                                                                              |             |                                                                                                                                | Treasurer Name<br>RAYMOND SOI U ZENG                                                                                  |                 |              |
| Street Address<br>4 MILROSE AVENUE                                                                                                                                                                                                                |             |                                                                                                                                | Street Address<br>168 POST ROAD                                                                                       |                 |              |
| City<br>WESTERLY                                                                                                                                                                                                                                  | State<br>RI | Zip<br>02891                                                                                                                   | City<br>WESTERLY                                                                                                      | State<br>RI     | Zip<br>02891 |
| 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>DANNY JING RU ZENG                                                                                                                                                                                                               |             |                                                                                                                                | Director Name<br>BRIEN BAI RU ZENG                                                                                    |                 |              |
| Street Address<br>4 MILROSE AVENUE                                                                                                                                                                                                                |             |                                                                                                                                | Street Address<br>21 RAYMOND STREET                                                                                   |                 |              |
| City<br>WESTERLY                                                                                                                                                                                                                                  | State<br>RI | Zip<br>02891                                                                                                                   | City<br>WESTERLY                                                                                                      | State<br>RI     | Zip<br>02891 |
| Director Name<br>RAYMOND SOI U ZENG                                                                                                                                                                                                               |             |                                                                                                                                | Director Name                                                                                                         |                 |              |
| Street Address<br>168 POST ROAD                                                                                                                                                                                                                   |             |                                                                                                                                | Street Address                                                                                                        |                 |              |
| City<br>WESTERLY                                                                                                                                                                                                                                  | State<br>RI | Zip<br>02891                                                                                                                   | City                                                                                                                  | State           | Zip          |
| 9. Shares Authorized<br>This information is currently of record in the Department of State.<br>Changes require an additional filing.                                                                                                              |             |                                                                                                                                | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |                 |              |
|                                                                                                                                                                                                                                                   |             |                                                                                                                                | NUMBER OF SHARES                                                                                                      | CLASS/SERIES    | PAR VALUE    |
|                                                                                                                                                                                                                                                   |             |                                                                                                                                | 300                                                                                                                   | COMMON          | NO PAR 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<br>DANNY JING RU ZENG                                                                                                                                                                                           |             |                                                                                                                                |                                                                                                                       | Date<br>2.16.21 |              |
| Signature of Authorized Representative                                                                                                                                                                                                            |             |                                                                                                                                |                                                                                                                       |                 |              |

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov