



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.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2021 FEB 26 P 2:30

1. Entity ID Number 142028		2. Exact name of the Corporation ICHIBAN CORPORATION			
3. Principal Office Address 146 Gansett Avenue			City Cranston	State RI	Zip 02910
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island To operate, maintain and carry on a restaurant business, to market, prepare and sell food and beverages of all kinds.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Tong Il Kim			Vice-President Name Wai Ming Kim		
Street Address 146 Gansett Avenue			Street Address 146 Gansett Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Secretary Name Wai Ming Kim			Treasurer Name Wai Ming Kim		
Street Address 146 Gansett Avenue			Street Address 146 Gansett Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Tong Il Kim			Director Name Wai Ming Kim		
Street Address 146 Gansett Avenue			Street Address 146 Gansett Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
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 ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		PAR VALUE
			100	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 WAI MING KIM				Date 2/16/2021	
Signature of Authorized Representative Wai Ming Kim					

FILED

FEB 26 2021

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