



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

FILED

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

MAR 17 2021
BY 2002

1. Entity ID Number 000889777		2. Exact name of the Corporation YAN'S CUISINE OF PROVIDENCE, INC.												
3. Principal Office Address 83 Benevolent Street			City Providence	State RI	Zip 02906									
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island Operation of a Chinese restaurant												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name Yan Xu			Vice-President Name Yan Xu											
Street Address 25 Larkspur Road			Street Address 25 Larkspur Road											
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818									
Secretary Name Yan Xu			Treasurer Name Yan Xu											
Street Address 25 Larkspur Road			Street Address 25 Larkspur Road											
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name Yan Xu			Director Name											
Street Address 25 Larkspur Road			Street Address											
City East Greenwich	State RI	Zip 02818	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 ☐											
This information is currently of record in the Department of State. Changes require an additional filing.			<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align:center">NUMBER OF SHARES</th> <th style="text-align:center">CLASS/SERIES</th> <th style="text-align:center">PAR VALUE</th> </tr> </thead> <tbody> <tr> <td style="text-align:center">1,00.00</td> <td style="text-align:center">CNP</td> <td style="text-align:center">\$0.0000</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	1,00.00	CNP	\$0.0000			
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1,00.00	CNP	\$0.0000												
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 Yan Xu			Date 3/08/21											
Signature of Authorized Representative 														

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov