



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

FILED

JUN 17 2021

BY 155
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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.

1. Entity ID Number 001018622		2. Exact name of the Corporation Bayon Market, Inc.												
3. Principal Office Address 759 Potters Avenue			City Providence	State RI	Zip 02907									
4. NAICS Code 445110		6. Brief description of the character of business conducted in Rhode Island Retail food market												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name Rithy Thay			Vice-President Name Rithy Thay											
Street Address 95 Bailey Street			Street Address 95 Bailey Street											
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920									
Secretary Name Rithy Thay			Treasurer Name Rithy Thay											
Street Address 95 Bailey Street			Street Address 95 Bailey Street											
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name NONE			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 ☐											
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;">100</td> <td style="text-align: center;">Common Stock</td> <td style="text-align: center;">\$0.00 - NO PAR</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common Stock	\$0.00 - NO PAR			
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100	Common Stock	\$0.00 - NO PAR												
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 Rithy Thay			Date 06-14-2021											
Signature of Authorized Representative 			SIGN DOCUMENT HERE											

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