



State of Rhode Island

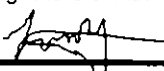
Department of State - Business Services Division

Annual Report for the year: **2022**
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 001725125		2. Exact name of the Corporation GOLDEN HOUSE RI INC			
3. Principal Office Address 485 BRANCH AVE			City PROVIDENCE	State RI	Zip 02904
4. NAICS Code 722513		6. Brief description of the character of business conducted in Rhode Island RESTAURANT / FOOD SERVICE			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name SHUI MIAO YANG			Vice-President Name YU DAN PAN		
Street Address 10 SPRINGDALE AVE			Street Address 10 SPRINGDALE AVE		
City N PROVIDENCE	State RI	Zip 02904	City N PROVIDENCE	State RI	Zip 02904
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
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 ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
			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 SHUI MIAO YANG					Date 09/03/2021
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

SEP - 3 2021
CONFIRM #
806936
BY

FORM 630 - Revised: 08/2020