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

FILED
MAY 05 2022
BY ASOS

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	2. Exact name of the Corporation			
346295	GOLD STARS GIFT STORE, INC.			
3. Principal Office Address		City	State	Zip
484 LONDSDALE AVENUE		PAWTUCKET	RI	02860
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
44-45 - Retail Trade	SALE OF GENERAL MERCHANDISE AT RETAIL FOR PROFIT			
5. State of Incorporation				
RHODE ISLAND 1953				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name LIEV C. HENG			Vice-President Name KHENG L. HENG		
Street Address 10 LOCUST GLEN COURT			Street Address SAME		
City CRANSTON	State RI	Zip 02921	City	State	Zip
Secretary Name LIEV C. HENG			Treasurer Name KHENG L. HENG		
Street Address SAME			Street Address SAME		
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.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	200	COMMON	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	Date
LIEV C. HENG, PRESIDENT	04-29-2022
Signature of Authorized Representative	
Liev C. Heng SIGN DOCUMENT HERE	

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

FORM 630 - Revised: 10/2016