



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2023  
Corporation

JAN 09 2023

407 *2*

- Filing period: February 1 - May 1  
 → Filing Fee: \$50.00  
 → Penalty: Additional \$25.00 fee if form is not filed by May 31.

|   |  |  |  |                     |                         |
|---|--|--|--|---------------------|-------------------------|
| 1. Entity ID Number<br><b>001692515</b>   |  | 2. Exact name of the Corporation<br><b>JJOON INVESTMENTS, INC.</b> |  |                     |                         |
| 3. Principal Office Address<br><b>110 WATERMAN ST</b>   |  | City<br><b>PROVIDENCE</b>  | State<br><b>RI</b>   | Zip<br><b>02906</b> |                         |
| 4. NAICS Code<br><b>722110</b>  | 6. Brief description of the character of business conducted in Rhode Island<br><b>TEA SELLING RESTAURANT</b> |  |  |                     |                         |
| 5. State of Incorporation<br><b>RI</b>  |  |  |  |                     |                         |
| 7. List ALL officers (names and addresses) <span style="float:right">Check the box to indicate an attachment</span>   |  |  |  |                     |                         |
| President Name<br><b>HANJOON CHO</b>  |  |  | Vice-President Name<br><b>HANJOON CHO</b>  |                     |                         |
| Street Address<br><b>59 FOREST ST</b>   |  |  | Street Address<br><b>59 FOREST ST</b>  |                     |                         |
| City<br><b>PROVIDENCE</b>   | State<br><b>RI</b>   | Zip<br><b>02906</b>  | City<br><b>PROVIDENCE</b>  | State<br><b>RI</b>  | Zip<br><b>02906</b>     |
| Secretary Name<br><b>HANJOON CHO</b>  |  |  | Treasurer Name<br><b>HANJOON CHO</b>   |                     |                         |
| Street Address<br><b>59 FOREST ST</b>   |  |  | Street Address<br><b>59 FOREST ST</b>  |                     |                         |
| City<br><b>PROVIDENCE</b>   | State<br><b>RI</b>   | Zip<br><b>02906</b>  | City<br><b>PROVIDENCE</b>  | State<br><b>RI</b>  | Zip<br><b>02906</b>     |
| 8. List ALL directors (names and addresses) <span style="float:right">Check the box to indicate an attachment</span>  |  |  |  |                     |                         |
| Director Name<br><b>HANJOON CHO</b>   |  |  | Director Name  |                     |                         |
| Street Address<br><b>59 FOREST ST</b>   |  |  | Street Address   |                     |                         |
| City<br><b>PROVIDENCE</b>   | State<br><b>RI</b>   | Zip<br><b>02906</b>  | City   | State               | Zip                     |
| Director Name   |  |  | Director Name  |                     |                         |
| Street Address  |  |  | Street Address   |                     |                         |
| City  | State  | Zip  | City   | State               | Zip                     |
| 9. Shares Authorized  |  |  | 10. Shares Issued <span style="float:right">Check the box to indicate an attachment</span> |                     |                         |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.  |  |  | NUMBER OF SHARES   |                     |                         |
|   |  |  | CLASS/SERIES   |                     |                         |
|   |  |  | PAR VALUE  |                     |                         |
|   |  |  | <b>100000</b>  |                     |                         |
|   |  |  | <b>CNP</b>   |                     |                         |
|   |  |  | <b>0</b>   |                     |                         |
| 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.<br>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<br><b>HANJOON CHO</b>   |  |  |  |                     | Date<br><b>1-5-2023</b> |
| Signature of Authorized Representative<br><i>Chojun</i>   |  |  |  |                     |                         |