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State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2020
Corporation

→ 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	2. Exact name of the Corporation
001699270	YU HOLDING INC

3. Principal Office Address	City	State	Zip
101E NIPMUC TRL	N PROVIDENCE	RI	02904

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
551112	HOLDING COMPANY
5. State of Incorporation	
RI	

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

President Name	Street Address	City	State	Zip
YUCHEN YU	101E NIPMUC TRL	N PROVIDENCE	RI	02904

Vice-President Name	Street Address	City	State	Zip
PEIQI ZHANG	101E NIPMUC TRL	N PROVIDENCE	RI	02904

Secretary Name	Street Address	City	State	Zip
YUCHEN YU	101E NIPMUC TRL	N PROVIDENCE	RI	02904

Treasurer Name	Street Address	City	State	Zip
YUCHEN YU	101E NIPMUC TRL	N PROVIDENCE	RI	02904

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

Director Name	Street Address	City	State	Zip
YUCHEN YU	101E NIPMUC TRL	N PROVIDENCE	RI	02904
Director Name	Street Address	City	State	Zip
Director Name	Street Address	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 STOCK	0

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
YUCHEN YU	7/20/2023

Signature of Authorized Representative

X

FILED

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

AUG 25 2023
BY RBINRV

FORM 630- Revised: 04/2023