



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2022

Corporation

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

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R.I. DEPT. OF STATE
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1. Entity ID Number 001673269		2. Exact name of the Corporation Vape pro Inc.			
3. Principal Office Address 1407 MENDON ROAD			City CUMBERLAND	State RI	Zip 02864
4. NAICS Code 453991		6. Brief description of the character of business conducted in Rhode Island VAPE SHOP SELLS E-CIG, E-JUICE, ETC. TITLE: 7-1.2			
5. State of Incorporation RI					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name CHONGLIN ZHENG			Vice-President Name		
Street Address 426 ARNOLD ROAD			Street Address		
City COVENTRY	State RI	Zip 02816	City	State	Zip
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 <input type="checkbox"/>
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 <input type="checkbox"/>	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		200			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 CHONGLIN ZHENG				Date 01/09/2024	
Signature of Authorized Representative 					

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

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