



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2024

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

APR 11 2024

BY

11196 DS

| | | | |
|---|---|---|----------------|
| 1. Entity ID Number 150707 | | 2. Exact name of the Corporation The Lucky Chen's Corp. | |
| 3. Principal Office Address 609 Smithfield Avenue | | City Lincoln | State RI |
| | | Zip 02865 | |
| 4. NAICS Code 722511 | 6. Brief description of the character of business conducted in Rhode Island Operating a restaurant | | |
| 5. State of Incorporation Rhode Island | | | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | |
| President Name Suzan Chen | | Vice-President Name Suzan Chen | |
| Street Address 118 Massachusetts Avenue | | Street Address 118 Massachusetts Avenue | |
| City Providence | State RI | City Providence | State RI |
| Zip 02905 | | Zip 02905 | |
| Secretary Name Weimin Chen | | Treasurer Name Weimin Chen | |
| Street Address 118 Massachusetts Avenue | | Street Address 118 Massachusetts Avenue | |
| City Providence | State RI | City Providence | State RI |
| Zip 02905 | | Zip 02905 | |
| 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 | City | State |
| Zip | | Zip | |
| Director Name | | Director Name | |
| Street Address | | Street Address | |
| City | State | City | State |
| Zip | | 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. | | NUMBER OF SHARES | |
| Changes require an additional filing. | | CLASS/SERIES | |
| | | PAR VALUE | |
| | | 300 | Common |
| | | | 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 Suzan Chen, President | | | Date 4/3/24 |
| Signature of Authorized Representative | | | |

MAIL TO:

Division of Business Services

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