| State of Rhode Island Fee: \$50.00   Office of the Secretary of State Office State  |
|---|
| Division Of Business Services   |
| 148 W. River Street   |
| Providence RI 02904-2615  |
| (401) 222-3040  |
| Business Corporation<br>Annual Report<br>Filing Period: February 1 - May 1  |
| In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00. |
| ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025  |
| 1. Corporate ID No. 001757732   |
| 2. Name of Corporation <u>NEW LUCKY GARDEN INC</u>  |
| 3. Street Address Principal Business Office:  |
| No. and Street: 576 METACOM AVE STE 17  |
| City or Town: BRISTOL State: RI Zip: 02809 Country: USA   |
| 4. Business Phone No.   |
| 4. Business Phone No.   |
| <u>3475741968</u>   |
| 5. State of Incorporation   |
| State: <u>RI</u>  |
| NAICS CODE  |
| Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.  |
| <u>722513</u>   |
| 6. Brief Description of the Character of Business Conducted in Rhode Island   |
| CHINESE FOOD TAKE OUT   |
| 7. Names and Addresses of the Officers and Directors:   |
| All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.   |

|  | Individual Name<br>First, Middle, Last, Suffix |                          | Address<br>Address, City or Town, State, Zip Code, Country |  |  |
|--|--|--------------------------|--|--|--|
| INCORPORATOR   | HONGWEI ZHAO                                   |                          | 576 METACOM AVENUE SUITE 17<br>BRISTOL, RI 02809 USA       |  |  |
| INCORPORATOR   | YONGLEI REN                                    |                          | 576 METACOM AVENUE SUITE 17<br>BRISTOL, RI 02809 USA       |  |  |
| . Shares Authorized and I                              | ssued  |                          |  |  |  |
| Class of Stock   | Series of Stock                                | Par Value Per<br>Share   |  | Total Authorized<br>Shares<br>Number of Shares | Total Issued<br>and<br>Outstanding<br>Num of<br>Shares |
|  | _  | \$0.0000                 |  | <u>_</u>                                       | I  |
| CNP<br>. This report must be exec                      |  | e corporat               | tion by an   |  |  |
| . This report must be exec<br>ne corporation is in the | hands of a receiver of receiver of trustee.    | e corporat<br>or trustee | tion by an   | authorized repres                              | entative. If<br>ed on behalt                           |

Form No. 630 Revised 09/07

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