



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2020 Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

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 BUS SVCS DIV
 2020 MAY 26 PM 4:08

1. Entity ID Number 000119178		2. Exact name of the Corporation Lu-Lin, Inc.			
3. Principal Office Address 240 Vernon Dr.			City Chepachet	State RI	Zip 02814
4. NAICS Code 000531390		6. Brief description of the character of business conducted in Rhode Island to accuire, buy, purchase, lease or otherwise and to			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Mark Bard			Vice-President Name		
Street Address PO Box 712			Street Address		
City Chepachet	State RI	Zip 02814	City	State	Zip
Secretary Name Mark Bard			Treasurer Name Mark Bard		
Street Address PO Box 712			Street Address PO box 712		
City Chepachet	State RI	Zip 02814	City Chepachet	State RI	Zip 02814
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
			200		common
					PAR VALUE
					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 Mark Bard				Date 05/22/2020	
Signature of Authorized Representative <i>Mark Bard</i>				FILED JUN 26 2020 BY <u>GAS/15</u> H.A.	
SIGN DOCUMENT HERE					

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