



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
 Corporation

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

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

2023 FEB 23 A 9:30

1. Entity ID Number 000126276		2. Exact name of the Corporation Yuen Yuen Corporation			
3. Principal Office Address 150 Elmwood Ave, Unit 4			City Providence	State RI	Zip 02904
4. NAICS Code 440191		6. Brief description of the character of business conducted in Rhode Island Dry herbs, Teas and and Dry Goods			
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 Ying Chun Mok			Vice-President Name		
Street Address 914 Lower River Rd.			Street Address		
City Lincoln	State RI	Zip 02865	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			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		0		JK	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 Ying Chun Mok				Date 2/23/2023	
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

FEB 23 2023
 BY ML DERYM
 FORM 830 - Revised: 11/2021