# State of New Hampshire
## 2007 ANNUAL REPORT

**The following information shall be given as of January 1 preceeding the due date Pursuant to RSA 304-C:80.**

**REPORT DUE BY April 1, 2007**

**ANNUAL REPORTS RECEIVED AFTER THE DUE DATE WILL BE ASSESSED A LATE FEE.**

**Filed**

**Date Filed: 07/11/2008**

**Business ID: 378787**

**William M. Gardner**

**Secretary of State**

**MING CHU, LLC**

**12 UNION ST**

**ROCHESTER, NH 03867**

ENTITY TYPE: LLC

BUSINESS ID: 378787

STATE OF DOMICILE: NEW HAMPSHIRE

RESTAURANT

1

**ADDRESS OF PRINCIPAL OFFICE:**

**12 UNION ST**

**ROCHESTER, NH 03867**

**REGISTERED AGENT AND OFFICE:**

**CHENG, KAM CHU**

**8 FORTIER DRIVE**

**ROCHESTER, NH 03867**

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**If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.**

☐ The new mailing address

☐ The new principal office address

**PO Box is acceptable.**

3

**MANAGERS** — **A**

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

**LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT**

NAME .....

STREET .....

CITY/STATE/ZIP

NAME .....

STREET .....

CITY/STATE/ZIP

NAME .....

STREET .....

CITY/STATE/ZIP

NAME .....

STREET .....

CITY/STATE/ZIP

**MEMBERS** — **B**

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

**MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS**

MEMB. **Ming Chu LLC**

STREET **8 Fortier Drive**

CITY/STATE/ZIP **Rochester NH 03867**

NAME .....

STREET .....

CITY/STATE/ZIP

NAME .....

STREET .....

CITY/STATE/ZIP

NAME .....

STREET .....

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

4

To be signed by the manager, if no manager, must be signed by a member.
I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

**Sign here:** **Kam Chu Cheng**

**Please print name and title of signer:** **Kam Chu Cheng** / **MEMBER**

NAME TITLE

FEE DUE: **$150.00**

E-MAIL ADDRESS (OPTIONAL):

037878720071505

**WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED**

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

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