

Amended Complaint and Verified Article 78 Petition Exhibit List

EXHIBIT	DOCUMENT DESCRIPTION
I	Chino LTD Delaware for Incorporation
II	Chino LTD's Filing Receipt for Application for Authority (Foreign Bus)
III	(1) Survey Given to Potential Client, Caridad Restaurant, in Spanish, (2) English Translation of Survey and (3) Certificate of Translation
IV	CBC's New York Certificate of Incorporation
V	Distribution agreement with NobelCom LLC
VI	Bitcoin Processing Agreement between CBC and Neio Wireless
VII	Photo of Signage Given To Stores
VIII	Application under the New York State Minority Owned/Women Owned Business Enterprise Program for Chino LTD and Status Report
IX	Chino LTD's Application for License to Engage in Virtual Currency Business Activity
X	Receipt from Rehana's Wholesale indicating Bitcoin purchase
XI	January 4, 2016 Letter from New York State Department of Financial Services
XII	Chino LTD's 2013 U.S. Income Tax Return, filing as an "S Corporation"
XIII	Chino LTD's 2014 U.S. Income Tax Return, filing as an "S Corporation"
XIV	Chino LTD's 2015 U.S. Income Tax Return, filing as an "S Corporation"
XV	Chino LTD's 2016 U.S. Income Tax Return, filing as an "S Corporation"

EXHIBIT “I”

County of New Castle
Dated: November 19th, 2013

ORGANIZATION ACTION IN WRITING OF INCORPORATOR

OF

CHINO LTD

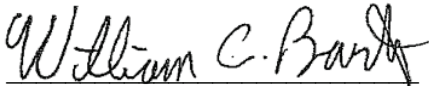
(Organized on November 19th, 2013)

The following action is taken this day through this instrument by the incorporator of the above corporation:

1. The election of the following person[s] to serve as the director[s] of the corporation until the first annual meeting of stockholders and until their successors are elected and qualified or until their earlier resignation or removal:

Theo B Chino

The Company Corporation, Incorporator

By: 

Name: William Bartz
Assistant Secretary

CERTIFICATE OF INCORPORATION

FIRST: The name of this corporation shall be: CHINO LTD

SECOND: Its registered office in the State of Delaware is to be located at 2711 Centerville Road, Suite 400, Wilmington, County of New Castle, Delaware, 19808. The name of its registered agent at such address is The Company Corporation.

THIRD: The purpose or purposes of the corporation shall be:

To engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware.

FOURTH: The total number of shares of stock, which this corporation is authorized to issue is One Thousand, Five Hundred (1,500) shares of common stock without a par value

FIFTH: The name and address of the incorporator is as follows:

The Company Corporation
2711 Centerville Road
Suite 400
Wilmington, Delaware 19808

SIXTH: The Board of Directors shall have the power to adopt, amend or repeal the by-laws.

SEVENTH: No director shall be personally liable to the Corporation or its stockholders for monetary damages for any breach of fiduciary duty by such director as a director. Notwithstanding the foregoing sentence, a director shall be liable to the extent provided by applicable law, (i) for breach of the director's duty of loyalty to the Corporation or its stockholders, (ii) for acts or omissions not in good faith or which involve intentional misconduct or a knowing violation of law, (iii) pursuant to Section 174 of the Delaware General Corporation Law or (iv) for any transaction from which the director derived an improper personal benefit. No amendment to or repeal of this Article Seventh shall apply to or have any effect on the liability or alleged liability of any director of the Corporation for or with respect to any acts or omissions of such director occurring prior to such amendment.

IN WITNESS WHEREOF, the undersigned, being the incorporator herein before named, has executed signed and acknowledged this certificate of incorporation this 19th day of November, 2013.

The Company Corporation, Incorporator

By: /s/ William Bartz
Name: William Bartz
Assistant Secretary

EXHIBIT “II”

FILING RECEIPT

ENTITY NAME: CHINO LTD

DOCUMENT TYPE: APPLICATION FOR AUTHORITY (FOREIGN BUS)

COUNTY: NEWY

FILED:02/24/2014 DURATION:PERPETUAL CASH#:140224000732 FILM #:140224000671
DOS ID:4533808

FILER:

EXIST DATE

THEO CHINO
640 RIVERSIDE DRIVE
10B
NEW YORK, NY 10031

02/24/2014

ADDRESS FOR PROCESS:

THEO CHINO
640 RIVERSIDE DRIVE
NEW YORK, NY 10031

10B

REGISTERED AGENT:



The corporation is required to file a Biennial Statement with the Department of State every two years pursuant to Business Corporation Law Section 408. Notification that the biennial statement is due will only be made via email. Please go to www.email.ebiennial.dos.ny.gov to provide an email address to receive an email notification when the Biennial Statement is due.

SERVICE COMPANY: ** NO SERVICE COMPANY **

SERVICE CODE: 00

FEES 225.00
FILING 225.00
TAX 0.00
CERT 0.00
COPIES 0.00
HANDLING 0.00

PAYMENTS 225.00
CASH 0.00
CHECK 225.00
CHARGE 0.00
DRAWDOWN 0.00
OPAL 0.00
REFUND 0.00

DOS-1025 (04/2007)

EXHIBIT “III”

MAR 26 ENT'D



Chino, Ltd

Negocio

Nombre del negocio

Dirección

Nombre de la persona que toma
decisión

Hora que se puede encontrar el
dueño

Caridad Restaurant
3531 Broadway
Amauris

Aceptan Tarjetas de Crédito

Fees

yes

Aceptaría trabajar con el Bitcoin

yes!

Qué opinión sobre el Bitcoin

dice que eso no vendra
ahora pero espero que suceda

Notas (correo electrónico, teléfono, etc ..)

Amaury@caridad145.com

MARCH 26, 2017



Chino, Ltd

Business

Name of the business

CARIDAD RESTAURANT

Address

3531 BROADWAY

Name of the person that makes decision

AMAUROS

Time the owner can be reached

Accept Credit Card

Fees

YES

Would they accept working with Bitcoin

YES!

What opinion of the Bitcoin

SAYS THAT SHE WILL NOT USE AT THIS MOMENT, BUT HOPE ONE DAY

Notes (email, phone number, etc....)

AMAURA@CARIDAD145.COM

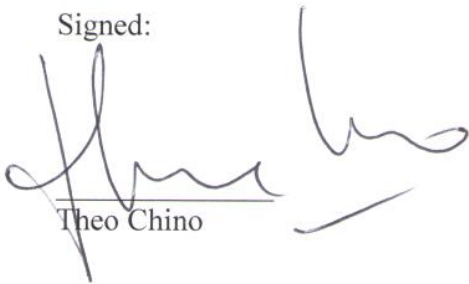
--- ENGLISH TRANSLATION ---

CERTIFICATE OF ACCURACY IN TRANSLATION

I, Theo Chino, hereby certify that I am fluent in both English and Spanish, and that I have faithfully translated from Spanish into English, to the best of my knowledge, the attached document, titled:

“Survey Given to Caridad Restaurant”

Signed:



Theo Chino

New York, New York
October 25, 2016

EXHIBIT “IV”

STATE OF NEW YORK

DEPARTMENT OF STATE

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is true copy of said original.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on December 31, 2014.

A handwritten signature in cursive script that reads "Anthony Giardina".

Anthony Giardina
Executive Deputy Secretary of State

CERTIFICATE OF INCORPORATION
OF

Conglomerate Business Consultants Inc

Under Section 402 of the Business Corporation Law

FIRST: The name of the corporation is:

Conglomerate Business Consultants Inc

SECOND: This corporation is formed to engage in any lawful act or activity for which a corporation may be organized under the Business Corporation Law, provided that it is not formed to engage in any act or activity requiring the consent or approval of any state official, department, board, agency or other body without such consent or approval first being obtained.

THIRD: The county, within this state, in which the office of the corporation is to be located is NEW YORK.

FOURTH: The total number and value of shares of common stock which the corporation shall have authority to issue is: 200 SHARES WITH NO PAR VALUE.

FIFTH: The Secretary of State is designated as agent of the corporation upon whom process against it may be served. The address within or without this state to which the Secretary of State shall mail a copy of any process against the corporation served upon him or her is:

Conglomerate Business Consultants Inc
14 Wall Street 20th Floor
New York, NY 10005

I certify that I have read the above statements, I am authorized to sign this Certificate of Incorporation, that the above statements are true and correct to the best of my knowledge and belief and that my signature typed below constitutes my signature.

Silfrido Martinez (signature)

Silfrido Martinez, INCORPORATOR
14 Wall Street 20th Floor
New York, NY 10005

Filed by:
Silfrido Martinez
14 Wall Street 20th Floor
New York, NY 10005

FILED WITH THE NYS DEPARTMENT OF STATE ON: 12/31/2014
FILE NUMBER: 141231010182; DOS ID: 4686913

ONLINE FILING RECEIPT

ENTITY NAME: CONGLOMERATE BUSINESS CONSULTANTS INC

DOCUMENT TYPE: INCORPORATION (DOM. BUSINESS)

COUNTY: NEW

FILED:12/31/2014 DURATION:PERPETUAL CASH#:141231010182 FILE#:141231010182
DOS ID:4686913

FILER:

EXIST DATE

SILFRIDO MARTINEZ
14 WALL STREET 20TH FLOOR
NEW YORK, NY 10005

12/31/2014

ADDRESS FOR PROCESS:

CONGLOMERATE BUSINESS CONSULTANTS INC
14 WALL STREET 20TH FLOOR
NEW YORK, NY 10005

REGISTERED AGENT:

STOCK: 200 NPV



The corporation is required to file a Biennial Statement with the Department of State every two years pursuant to Business Corporation Law Section 408. Notification that the Biennial Statement is due will only be made via email. Please go to www.email.ebiennial.dos.ny.gov to provide an email address to receive an email notification when the Biennial Statement is due.

SERVICE COMPANY: ** NO SERVICE COMPANY **
SERVICE CODE: 00

FEE:	145.00	PAYMENTS	145.00
	-----		-----
FILING:	125.00	CHARGE	145.00
TAX:	10.00	DRAWDOWN	0.00
PLAIN COPY:	0.00		
CERT COPY:	10.00		
CERT OF EXIST:	0.00		

DOS-1025 (04/2007)

Authentication Number: 1412310167 To verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at

EXHIBIT “V”

Original Message

Message ID	<201506081154.t58BsYts029008@intranet.inhse.knyc.ny.us.chino.ws>
Created at:	Mon, Jun 8, 2015 at 7:54 AM (Delivered after 222 seconds)
From:	CBC Info <autoinfo@cbcna.co>
To:	Bouna Fade <ouze91@gmail.com>
Subject:	\$214.00 or 4.67 mXBT - Monday, June 8, 2015
SPF:	PASS with IP 91.121.200.135 Learn more

[Download Original](#)

[Copy to clipboard](#)



Theo Chino <theo.chino@gmail.com>

\$214.00 or 4.67 mXBT - Monday, June 8, 2015

CBC Info <autoinfo@cbcna.co>
To: Bouna Fade <ouze91@gmail.com>

Mon, Jun 8, 2015 at 7:54 AM



Multiservice And Innovations Inc.

Owner: Bouna Fade

If you see any errors on the transactions you performed yesterday, please contact us immediately.

Information valid from
06/08/2015 - 8:00 am to 06/08/2015 - 10:00 pm

Bitcoin rate provided by:
 Chino, Ltd

214.00 USD = 1.00 XBT
1.00 USD = 4.67 mXBT



Balance:

Time	Product	Retail Price	Retail Cost	Status	Invoice Number	Phone Number
11:58 AM	Nobel One	10.00	7.50	Cancelled	P-1481261246	917-362-1878

12:04 PM	Nobel One	5.00	3.75	Fully processed	P-5602261227	917-362-1878
12:02 PM	Nobel One	10.00	7.50	Fully processed	P-7991261224	347-394-9198
12:00 PM	Nobel One	5.00	3.75	Fully processed	P-3091261272	347-940-9505
01:05 PM	T-Mobile RTR + Prepaid Wireless	60.00	58.80	Fully processed	P-9844261277	34-75565026
01:04 PM	Top Up Guinea - Cellcom	5.00	4.55	Fully processed	P-1044261238	224-654419735
02:56 PM	Top Up Liberia --- Lonestar Cell (MTN)	5.00	4.30	Fully processed	P-9288261255	231-886754875
02:55 PM	Top Up Liberia --- Lonestar Cell (MTN)	5.00	4.30	Fully processed	P-8978261201	231-888743460
02:28 PM	Top Up Senegal - Orange	26.00	22.62	Fully processed	P-4487261211	221-774355980
02:22 PM	Nobel One	20.00	15.00	Fully processed	P-2367261260	917-536-7434
05:53 PM	Top Up Guinea - Cellcom	5.00	4.55	Fully processed	P-0345361258	224-656097743
05:41 PM	Top Up El Salvador - Movistar	5.00	4.33	Fully processed	P-7205361236	503-61300435
06:14 PM	Top Up Guinea - Cellcom	5.00	4.55	Fully processed	P-8906361274	224-654431409
07:40 PM	Top Up Mali - Orange	12.00	10.32	Fully processed	P-7009361274	223-78774327
Total cost for Sunday, June 7, 2015 transactions:			\$ 155.81			

EXHIBIT “VI”



Conglomerate Business Consultants, Inc.

14 Wall Street – 20th Floor, New York, NY 10005
(888) 522-5211 – support@cbcna.co

001016

BITCOIN PROCESSING AGREEMENT

Effective beginning 05 / 28 / 2015 with the regularly scheduled transfers following the date of acceptance of this authorization by **Conglomerate Business Consultants, Inc.** ("CBC, Inc") and of which CBC, Inc. will notify me in writing, I (hereafter "I", "me" or "my") hereby authorize **Conglomerate Business Consultants, Inc** and its successors or assigns to process blockchain inscriptions and bitcoin transfers on my behalf.

The amount of each such **inscription** will be equal to my scheduled invoice due under the retail contract held by CBC, Inc and I (the "Agreement".)

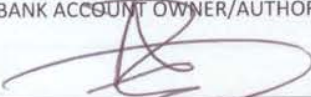
I understand that any financial information provided herein shall be deemed a part of this authorization.

Activation Fee <u>0</u>		Per Transaction Fee	
Monthly Airtime Fee (per terminal) <u>0</u>		One Time Fee <u>0</u>	
BANK ROUTING NUMBER	ACCOUNT TYPE (CHECK ONE)	BANK ACCOUNT NUMBER	

I may cancel this authorization by one of the following methods:

- a. Sending a written cancellation request by regular mail to **CBC, Inc, 14 Wall St, 20th Floor, New York, NY 10005;**
- b. Sending an email requesting cancellation addressed to **autopaycancel@cbcna.co;**
- c. Sending a cancellation request by facsimile to **(888) 531-3901;** or
- d. Enrolling as a registered user at **http://www.cbcna.co** and canceling as provided in that website;
- e. Requesting from any CBC, Inc. representative for the written cancellation form in person or by calling **(888) 522-5211** and returning it to CBC, Inc.

This authorization will remain in full force and effect until I cancel it by a method listed herein; and CBC, Inc. cancels it in writing. x AR

COMPANY NAME Neo wireless		ADDRESS 1481 Saint Nicholas Ave	
FINANCIAL INSTITUTION NAME		NAME(S) ON BANK ACCOUNT	
BANK ROUTING NUMBER	ACCOUNT TYPE (CHECK ONE) <input type="checkbox"/> Checking <input type="checkbox"/> Savings	BANK ACCOUNT NUMBER	
BANK ACCOUNT OWNER/AUTHORIZED SIGNER'S SIGNATURE 			DATE 05/28/15

Important Enrollment Information

- 1. Please make sure all information above is filled in and that a blank voided check is included with this authorization form containing any missing information.
- 2. Return the Authorization Form and voided check to the address below or by fax to 1-888-531-3901.

**Conglomerate Business Consultants, Inc.
14 Wall Street – 20th floor
New York, NY 10005**

EXHIBIT “VII”



bitcoin
**ACCEPTED
HERE**

cBc

CONGLOMERATE BUSINESS CONSULTANTS INC.
14 Wall Street New York, NY 10005
1-888-522-5211
E-mail: sales@cbcna.co
www.cbcna.co



FOR TECHNICAL SUPPORT
PLEASE CONTACT US AT:

1-888-316-4123
support@cbcna.co

EXHIBIT “VIII”

[Main](#) | [Documents](#) | [Signature](#) | [Submit](#) | [Q & A](#) | [Utilities](#) | [Cert List](#)

Chino Ltd

Application Type: **New Application**

Application Number: **1109683**

Application status: **Submitted, Pending Receipt**

Application started: **6/26/2015**

Submitted: **8/16/2015**

Print to Printer

Print to PDF File

Certification Application Information

Application Type	New Application
Certifying Agency	New York State
Business Name	Chino Ltd
Current Status	Submitted, Pending Receipt
Application Number	1109683
Contact Person	Theo Chino

Questions

1.A. This firm is applying for certification as

Minority Business Enterprise (MBE)

1.B. Name of applicant firm

Chino Ltd

1.C. "Doing Business As" (DBA) Name

1.D. Business Address

640 Riverside Drive
10B
New York, NY 10031

1.E. Mailing Address

640 Riverside Drive
10B
New York, NY 10031

1.F. Business Phone Number

347-809-5004

1.G. Alternate Business Number

1.H. Fax Number

212-809-5004

1.I. Email Address

nyscontract@vendor..chino.ws

1.J. Website

https://www.chino.ws

1.K. Twitter

1.L. Facebook

1.N. Federal Employer Identification Number (or SSN)

800961473

1.O. Contact Person

Theo Chino, Founder

1.P. Name of Company President/Chief Executive Officer/Owner

Theo Chino, CEO

1.Q. Type of ownership

Corporation

1.R. Date firm was established

11/19/2013

1.S. Did the business exist under a different type of business ownership prior to the date indicated above?

No

1.T. Method of Acquisition

Started new business

1.U. Date of acquisition

1.V. Gross Receipts

Year Ending	Total Receipts
2014	\$0
2013	\$0
2012	\$0

1.W. Number of employees

Permanent		Temporary/Seasonal	
Full-time	0	Full-time	0
Part-time	0	Part-time	0

1.X. In what regions of New York State are you willing and able to conduct your business activity?

All

2.A. Name & Position of all person(s) with ownership interest in this firm.

Name	Position	Gender	Ethnic Group	Citizen	Date of Ownership	Ownership %	Voting %
Theo Chino	CEO	Male	Hispanic	Yes	11/19/2013	100.0%	100.0%

2.B. If this firm is owned in full or in part by another firm, please identify the firm and percentage of ownership interest.

None

2.C. Please identify the cash and capital contributions to this firm by those identified as owners above.

Contributor/Source	Amount/Value	Type	Date of Contribution
Theo Chino	\$50,000	Cash/Loan	11/19/2013

2.D. Identify holdings of all shareholders

Shareholder	Number of Shares	Class	Amount Paid When Purchased	Date of Ownership
Theo Chino	1,500	Common	\$0	11/17/2013

2.E. Number of shares

	Authorized Shares	Issued Shares
Common Stock	1500	1500
Preferred Stock	1500	1500
Total Shares	3000	3000

2.F. List of current Board of Directors

Name	Title/Position	Date Appointed	Ethnicity	Gender
Theo Chino	President	11/17/2013	Hispanic	Male

3.A. If licensing, permits or accreditation is required to conduct the business, please identify

Not applicable or no licenses/permits held

3.B. Business Categories

Professional Service, Technical Service, Other: BlockChain Technology

3.C. Describe principal products/commodities sold, specialties or services offered

We offer Internet Blockchain technology which is licensed to other company to provide service to small businesses.

3.D. Provide the business's primary North American Industry Classification System (NAICS) number

NAICS 42511: Business to Business Electronic Markets

3.E. Provide the business's secondary North American Industry Classification System (NAICS) number**3.F. Additional OPTIONAL North American Industry Classification System (NAICS) number****3.G. Additional OPTIONAL North American Industry Classification System (NAICS) number****3.H. Additional OPTIONAL North American Industry Classification System (NAICS) number****3.I. Additional OPTIONAL North American Industry Classification System (NAICS) number****3.J. Additional OPTIONAL North American Industry Classification System (NAICS) number****3.K. Additional OPTIONAL North American Industry Classification System (NAICS) number****3.L. Additional OPTIONAL North American Industry Classification System (NAICS) number****3.M. Additional OPTIONAL North American Industry Classification System (NAICS) number****4.A. Identify those individuals responsible for managerial operations**

1. Financial Decisions

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

2. Estimating

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	

3. Preparing Bids

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

4. Negotiating Bonding

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

5. Negotiating Insurance

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

6. Marketing & Sales

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

7. Hiring & Firing

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

8. Supervising Field Operations

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

9. Purchasing Equipment/Sales

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

10. Manging & Signing Payroll

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

11. Negotiating Contracts

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

12. Signatories for Business Accounts

Name	Title/Position	Ethnicity	Gender	Owner
Theo Chino	Founder	Hispanic	Male	Yes

4.B. Is this firm currently involved in the bidding process or other contract/purchase order negotiations with any governmental agency, department or authority?

No

4.C. List the three largest completed accounts for which the applicant has provided goods or services within the last three years.

No projects currently underway

4.D. List the three largest active projects on which your firm is currently working

Yes

Firm/Organization Name	Phone	Location of Performance	Type of Work	Project Start Date	Anticipated Completion Date	Dollar Value of Contract
CBC Inc	8883164123	New York City	Provide Blockchain Service	1/1/2014	1/1/2020	\$1,000,000

4.E. Is the firm bonded?

No bonding currently in place

4.F. Are you a Union Shop?

No

5.A. List rented, leased, or owned office facilities.

None

5.B. List rented, leased, or owned warehouse, plant, and yard facilities.

None

5.C. List major equipment or machinery that is owned or leased by the firm.

None

5.D. List vehicles that are owned or leased by the firm.

None

5.E. Identify Bank(s) where all firm's accounts are maintained.

Name of Institution	Address	Contact person	Type of Account
None	None	None	None

5.F. Do you have a line of credit?

5.G. Major current creditors and/or lenders and types of investments and/or loans in the firm.

Yes

Name of Creditor/Lender	Type of Investment/ Credit/ Loan	Original Dollar Value of Investment/ Terms/ Credit/ Loan	Current Balance	Name of Guarantor(s)	Purpose of Loan
Self	Credit Loan	\$50,000	\$50,000	Self	Run day to day

6.A. Do any of the key personnel perform a management or supervisory function for any other business?

Yes

Person	Title	Business Name	Function
Theo Chino	CEO	CBC Inc	Day to day operations

6.B. At present, or at any time in the past, has your firm consisted of a partnership in which one or more of the partners are other firms?

No

6.C. Do any principals, officers and/or owners of the firm have an affiliation with any other firm?

No

6.D. At present, or at any time in the past, has your firm been a subsidiary of any other firm?

No

6.E. At present, or at any time in the past, has your firm owned any percentage of any other firm?

No

6.F. At present, or at any time in the past, has your firm had any subsidiaries?

Yes

Name of Business	Address	Type of Business
Chino Ltd	Dominican Republic	Blockchain Services

6.G. Has any other firm had an ownership interest in your firm at present or at any time in the past?

No

6.H. Do any of your immediate family members own or manage another company?

No

6.I. Does the firm share office space with any other firm?

No

6.J. Does the firm share yard space/warehouse space with any other firm?

No

6.K. Does the firm share equipment with any other firm?

No

7.A. C.P.A or Accountant for firm

None used

7.B. Attorney for firm

None used

8.A. Has the firm applied for certification as an M/WBE with another governmental agency, department or authority?

No

Mandatory Documents

Document	Status
Certification Application Notarization (New Application) Certification_Application_Notarization.jpg (JPG, 778.40 KB)	Attached by Theo Chino on 6/26/2015
Department of State registration for all domestic firms Incorporation.jpg (JPG, 813.57 KB) Delaware Dept of State Certificate	Attached by Theo Chino on 6/26/2015

<p>Personal Net Worth Affidavit, Attachment A for each minority or woman upon which certification is based Affidavit.pdf (PDF, 1.81 MB)</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Current year business Financial Statements: including Year-To-Date Balance Sheet and Profit & Loss Statement Intuit-2013.pdf (PDF, 7.20 KB) Intuit-Todate.pdf (PDF, 9.12 KB)</p>	<p>Attached by Theo Chino on 8/16/2015</p>
<p>Most recent three (3) years of Federal, and State tax returns for the BUSINESS including all statements, schedules, and amendments 2013_Chino_Ltd_Form_1120S_S_Corps_Tax_Return_Filing.pdf (PDF, 243.13 KB) Corp 2013 2014_Chino_Ltd_Form_1120S_S_Corps_Tax_Return_(v2)_Filing.pdf (PDF, 300.45 KB) Return 2014</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Most recent two (2) years of Federal and State PERSONAL tax returns; including all schedules, W2s, statements and amendments for each minority or woman upon which certification is based Return-2013.pdf (PDF, 671.03 KB) 2013 Personal Return Return-2014.pdf (PDF, 383.70 KB) Return 2014 W2-2013.pdf (PDF, 86.23 KB) W2 Theo W2-2014.pdf (PDF, 82.54 KB) W2 2014 Theo</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Documented proof of sources of capitalization and investments NOBankAccount.jpg (JPG, 286.78 KB)</p>	<p>Attached by Theo Chino on 8/16/2015</p>
<p>Bank signature card or letter from the bank identifying persons authorized to conduct transactions, level of authority and limitations, if any, on all business accounts Bank_Account.pdf (PDF, 42.74 KB) Bank Letter is Blockchain Addresses</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Proof of US Citizenship or Proof of permanent resident alien status (i.e. permanent resident "green" card.) for each Minority or Woman who has an ownership interest in the applicant firm Passports(1).jpg (JPG, 1.58 MB)</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Resumes of all principals, partners, officers and/or key employees of the firm ResumeTheoChino.pdf (PDF, 27.07 KB)</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Current, signed lease or Deed for all locations where your firm conducts business ProofOfAddress.pdf (PDF, 3.64 MB)</p>	<p>Attached by Theo Chino on 8/16/2015</p>
<p>Articles of Incorporation Article_of_Incorporation.pdf (PDF, 79.26 KB) Article Of Incorporation</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Copies of all issued stock certificates; front and back, as well as, next unissued certificate Stock_Certificate_1.pdf (PDF, 1.28 MB) Stock Certificate for 1500 shares</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Copy of completed, up-to-date stock ledger Stock_Ledger.jpg (JPG, 423.36 KB) Stock Ledger</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Corporation By-Laws Corporation_Bylaws.pdf (PDF, 86.82 KB) Bylaws</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>Minutes of first corporate organizational meeting and amendments 1st_minutes.pdf (PDF, 29.82 KB) 1st Minutes Minute_of_First_Meeting.pdf (PDF, 1.43 MB)</p>	<p>Attached by Theo Chino on 6/26/2015</p>
<p>State filing receipt, including amended receipts State_Filing_Receipt.jpg (JPG, 458.43 KB)</p>	<p>Attached by Theo Chino on 6/26/2015</p>

Required Documents

Generated by Theo Chino, Chino Ltd on 8/16/2015

Document	Status
Personal Net Worth Worksheet, Attachment B for each minority or woman upon which certification is based that has a net worth exceeding \$1.3 million Affidavit(1).pdf (PDF, 1.81 MB)	Attached by Theo Chino on 6/26/2015
Proof of gender (any government-issued identification)	Not Applicable , noted by Theo Chino on 6/26/2015
Proof of minority status as described in the definition of MBE under Article 15-A for for each Minority who has an ownership interest in the applicant firm Passports.jpg (JPG, 1.58 MB) Dominican Passport.	Attached by Theo Chino on 6/26/2015
All signed third party agreements including equipment rentals, purchase agreements, management, service agreements, etc.	Not Applicable , noted by Theo Chino on 6/26/2015
Copies of all licenses, permits, certifications, and/or accreditations utilized by this firm to conduct business, including those held by individual	Not Applicable , noted by Theo Chino on 6/26/2015
Copy of the New York State Vendor Tax Registration	Not Applicable , noted by Theo Chino on 6/26/2015
Signed lease Agreements or proof of ownership for office space, yard space, warehouse space, and/or equipment	Not Applicable , noted by Theo Chino on 6/26/2015
Vehicle registration(s) for all vehicles used for business purposes and/or charged to the Business	Not Applicable , noted by Theo Chino on 6/26/2015
Any certification, decertification or denial of certification documentation Oficio_fijción_domicilio.pdf (PDF, 320.91 KB) Certification to do business in the Dominican Republic	Attached by Theo Chino on 6/26/2015
Any employment agreements CarlosContract.pdf (PDF, 7.81 MB)	Attached by Theo Chino on 8/16/2015
If out-of-state, Certificate of Authority to conduct business in New York State, and any amendments State Filing Receipt(1).jpg (JPG, 458.43 KB)	Attached by Theo Chino on 6/26/2015
Copies of agreements relating to buy-out rights	Not Applicable , noted by Theo Chino on 6/26/2015
Copies of agreements relating to facts pertaining to the value of shares	Not Applicable , noted by Theo Chino on 6/26/2015
Copies of agreements relating to restriction on the disposal of stock loan agreements	Not Applicable , noted by Theo Chino on 6/26/2015
Copies of agreements relating to restrictions on the control of the corporation	Not Applicable , noted by Theo Chino on 6/26/2015
Copies of agreements relating to shareholder voting rights	Not Applicable , noted by Theo Chino on 6/26/2015
Copies of agreements relating to shareholders agreements	Not Applicable , noted by Theo Chino on 6/26/2015
Copies of agreements relating to stock options	Not Applicable , noted by Theo Chino on 6/26/2015
Written request for exemption from disclosure regarding trade secrets	Not Applicable , noted by Theo Chino on 6/26/2015
Written request for exemption from public disclosure of certain records maintained by the program Exception.jpg (JPG, 359.93 KB) Written Exception Request	Attached by Theo Chino on 6/26/2015
Proof of business activity in the form of a signed contract or purchase order Intro Letter (JPG, 324.70 KB) NewFormat.pdf (PDF, 2.26 MB) OldContracts.pdf (PDF, 2.46 MB)	Attached by Theo Chino on 8/16/2015
Addendum for MWBE Certification with County of Erie and City of Buffalo, Joint Certification Committee	Not Applicable , noted by Theo Chino on 6/26/2015
Addendum for MWBE Certification with The Port Authority of New York and New Jersey	Not Applicable , noted by Theo Chino on 6/26/2015
Addendum for MWBE Certification with New York City Department of Small Business Services NYC_AddendumForMWBECertification.pdf (PDF, 132.18 KB)	Attached by Theo Chino on 6/26/2015

Signature	Theo Chino
Title	Founder
Organization	Chino Ltd
Date	8/16/2015

[Customer Support](#)

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ATTACHMENT A: NYS MWBE CERTIFICATION
INDIVIDUAL PERSONAL NET WORTH AFFIDAVIT
Division of Minority and Women Business Development

Each individual owner relied upon for certification as a minority or women-owned business enterprise (hereinafter "MWBE") must complete this form and provide the applicable supplemental documentation as referenced below as part of the application for certification or recertification.

The personal net worth of each individual upon which certification is relied upon cannot exceed 3.5 million dollars. For certification purposes, personal net worth shall mean the aggregate adjusted net value of the assets of an individual remaining after total liabilities are deducted. Personal net worth includes the individual's share of assets held jointly with said individual's spouse but does not include the individual's ownership interest in the certified minority and women-owned business enterprise, the individual's equity in his or her primary residence, or up to five hundred thousand dollars of the present cash value of any qualified retirement savings plan or individual retirement account held by the individual less any penalties for early withdrawal.

I, Theo Chino, being duly sworn state that my social security number is: 124 - 52 - 6411 and I am a woman or a member of a minority group as defined in Article 15-A of the Executive Law. I own 100% percent of the equity in CHINO LTD, the business applying for certification or re-certification as an M or WBE with New York State. I have read the definition of net worth set forth in the statement above, and have calculated my net worth to be \$ 294,000.

Further, I understand that I am required to provide, with this affidavit, a true, executed copy of my submitted federal and state personal tax returns including all statements and schedules as filed for the prior taxable year. I also understand that in the event my personal net worth exceeds 1.3 million dollars at the time of this application, I am also required to submit a complete **Attachment B: Personal Financial Statement Worksheet** in the form or format supplied by the Division of Minority or Women's Business Development online at www.esd.ny.gov/mwbe.html.

I understand the tax returns I have submitted to the Division of Minority and Women Business Development as part of the certification or re-certification process must be true and correct copies of my personal tax returns and include all schedules, statements and amendments which I have submitted to the IRS and the state or, in the event that I have paid taxes in multiple jurisdictions, states where I have filed my most recent state income taxes. By signing below I am attesting that I am providing this as part of the application for certification or re-certification, and acknowledge any false statement made by the applicant will result in the denial of certification and is punishable as a Class E Felony under Section 175.35 of the Penal Law.

(Signature) *Theo Chino*

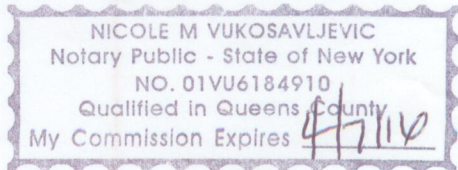
(Print) THEO CHINO

State of New York, County of New York. On this 24 day of June, 2015, before me appeared

(Name) Theo Chino to me personally known, who being duly sworn, properly did execute the foregoing affidavit and did state that s/he was properly authorized by

(Name of Firm) Chino Ltd. to execute the affidavit and did so as his or her free act and deed.

Notary Public Nicole M. Vukosavljevic
Commission Expires 4/7/16



Subject: NYS: Application Review In Process
From: New York State Contract System <ny@newnycontracts.com>
Date: 4/14/2017 2:39 PM
To: Theo Chino <nyscontract@vendor.chino.ws>

Certification Application Review In Process

Applicant: **Chino Ltd**
Certifying Agency: **New York State**
Application Type: **New Application**
Application Number: **1109683**
Contact: **Theo Chino**
Date Submitted: **8/16/2015**
Date Received: **4/14/2017**

Dear Theo Chino,

Your application received on **4/14/2017** is now in process. During this time, you may be contacted to supply additional information and/or supporting documentation. The staff person assigned to review your application will contact you to schedule an on-site visit at your principal place of business, if required.

To view your application, visit: <https://ny.newnycontracts.com/?GO=677>

If you have any questions, please email us at ny@newnycontracts.com.

New York State Contract System

Web: <https://ny.newnycontracts.com/>
Email: ny@newnycontracts.com

NYS M/WBE Program: <http://www.esd.ny.gov/MWBE.html>

This message was sent to: "Theo Chino"
Sent on: 4/14/2017 1:39:03 PM
System ReferenceID: 47208210

System Tip: Have you updated your contact information in the system lately?

EXHIBIT “IX”



APPLICATION FOR LICENSE TO ENGAGE IN VIRTUAL CURRENCY BUSINESS ACTIVITY

(Before filling out this form read the instructions carefully. All answers should be printed or typed. If additional space is required to complete any statement, prepare and annex a rider. Write "none" or "not applicable" where appropriate.)

August 7, 2015

To the Superintendent of Financial Services of the State of New York:

The undersigned, desiring to engage in Virtual Currency Business Activity pursuant to the provisions of 23 NYCRR 200, does hereby make application for a license in accordance with 23 NYCRR §200.

1. The name and full address of the applicant is (include any trade name, under assumed name (UAN) or doing business as (DBA) name):

CHINO, LTD

2. Type of Application is: (Check type)

De Novo (new licensee) [X] Other (specify) []

3. Form of Organization of Applicant is: (Check type of entity in which business will be conducted)

Individual (Sole Proprietor) [] Partnership [] Corporation [X]
Limited Partnership [] Association []
Limited Liability Company [] Other (specify) []

4. Is the applicant also applying for a money transmission license with the Department at this time? If yes, the applicant must also submit an Application for a License to Engage in the Business of Issuing Travelers Checks, Money Orders, Prepaid/Stored Value Cards, and/or Transmitting Money (available at the Department's website). Additionally, note that information or documents recently submitted in connection with an application for a money transmitter license may be used to cross-satisfy information requested as part of this application. Please see section III of the application instructions for more information.

Yes [] No [X]

5. Is the applicant currently licensed with the Department as a New York money transmitter?

Yes []

No

The documents and information attached hereto are hereby referred to and by this reference incorporated herein.

Thes CHINO
(Name of Applicant)

347-809-5002
(Telephone Number)

(Fax Number)



(Authorized Signature)
CEO

(Print Name and Title)

dfs license@ventor.chino.us
(E-Mail Address)

VERIFICATION

The undersigned swears or affirms that the information contained in this application, including the attached information and documents, is true and correct. FALSE WRITTEN STATEMENTS IN THIS APPLICATION ARE PUNISHABLE UNDER SECTION 210.45 OF THE NEW YORK PENAL LAW (making a punishable false written statement). Also, as per the New York Financial Services Law and regulations, the Superintendent of Financial Services may initiate regulatory actions against the licensee.

The undersigned further verifies that he/she is the named person below and that he/she is authorized to attest to and submit this application on behalf of the Applicant.

This application is executed at 640 Riverside Drive, New York
(or insert name of other jurisdiction) August 7 on
11, 2011.

Theo Ghino
(Applicant Name)

Theo Ghino
(Authorized Signature)

THEO GHINO, CEO
(Print Name and Title)

AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize any duly authorized representative of the New York State Department of Financial Services (DFS) bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to any professional license awarded to me (including any grievance records), employment, military, educational records (including, but not limited to academic achievement, attendance, athletic, personal history, and disciplinary records), credit records, and law enforcement records (including, but not limited to any record of charge, prosecution or conviction for criminal or civil offenses). I hereby direct you to release such information upon request to the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the DFS. Consent is granted for the DFS to furnish such information, as is described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as the custodian of such records, your employers, officers, employees, and related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I am furnishing my Social Security Account Number on a voluntary basis with the understanding such is not required by statute or regulation. I understand that the DFS will use the number only to assist the Superintendent of Financial Services in making a determination as to whether I meet the standards set forth pursuant to the Financial Services Law and regulations for receiving the license for which I am applying. Should there be any question as to the validity of this release, you may contact me as indicated below:

I have read the above release and agree to the terms and conditions therein.

Social Security Account Number: _____
Date of Birth: _____
Signature of Parent or Guardian (if required): _____
Date: _____
Current Address: _____
Telephone Number: _____
CPA/Bar Membership(s) State: _____
Registration Number: _____
Full Name (Signature): _____
Full Name (Typed or Printed): _____
(Include maiden and any other previously-used name(s)): _____

STATE OF _____ } ss.:
COUNTY OF _____ }

Before me, a Notary Public in and for said County and State, personally appeared the above-named who acknowledged that s/he did sign the foregoing instrument and that the same is his/her free and voluntary act and deed. IN TESTIMONY WHEREOF, I have hereunto set my hand and official seal at, _____ this _____ day of _____, 20_____.

Notary Public

BACKGROUND REPORT CERTIFICATION

Re: _____
(Subject of Report)

I, _____, do certify that a background report

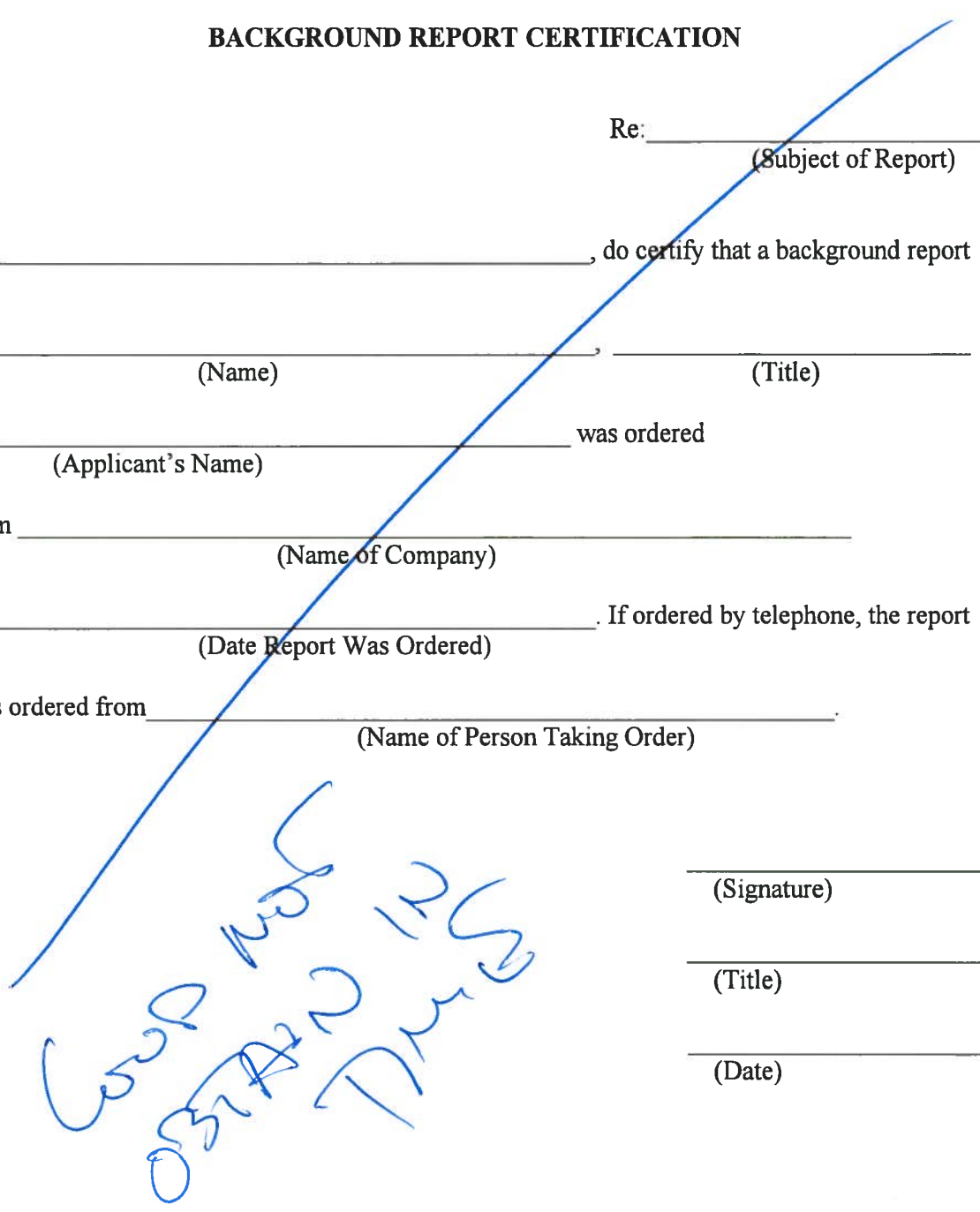
on _____, _____
(Name) (Title)

of _____ was ordered
(Applicant's Name)

from _____
(Name of Company)

on _____ . If ordered by telephone, the report
(Date Report Was Ordered)

was ordered from _____
(Name of Person Taking Order)



*WSP
OSTA
12/5/15*

(Signature)

(Title)

(Date)

THIS FORM MAY BE REPRODUCED

PERSONAL FINANCIAL STATEMENT

NAME THOM CHINO
 (APPLICANT, OFFICER, DIRECTOR, STOCKHOLDER, OR INDIVIDUAL, AS APPLICABLE)

ADDRESS 640 Riverside Drive, NY, 10031

To: THE NEW YORK STATE DEPARTMENT OF FINANCIAL SERVICES (DFS)

The undersigned make(s) the following statement of (my)(our)(its) assets and liabilities at the close of business of the 8 day of August, 2016.

PLEASE ANSWER ALL QUESTIONS USING "NO" OR "NONE" WHERE NECESSARY.

ASSETS		LIABILITIES AND NET WORTH	
Cash on Hand and in Banks (Sch 1)	20	Notes Payable Banks (Sch 1)	27800
Finance Agreements		Notes Payable Others (Sch 4)	
Finance Agreements-Pledged		Due to Principals (Sch 4)	
Notes Receivable		Notes Rec., Discounted (Contra)	
Notes Rec., Discounted (Contra)		Accounts Payable	
Accts and Loans Receivable		Accrued Expenses Payable	
Cash	\$1151.00	Accrued Interest Payable	
Securities (Sch 2)	\$24,127.54	Accrued Taxes and Asses Pay.	
Due from Part, Stkhrs, Off, Empl.		Brokers Margin Account Pay	
Inv. And Adv. -Affil. Or Subsid. Co.		Mortgages Payable (Sch 3)	
Mortgages Owned		Unearned Income	
Real Estate (Sch 3)		Valuation Reserve-Bad Debts	
Furn, Fix, and Equip (Net of Depr)	0	Valuation Reserve-Contingencies	
Other Assets (Itemize)		Other Liabilities (Itemize)	

		Total Liabilities	27.000
		Preferred Stock	
		Common Stock	
		Surplus	
		Net Worth (Indiv. Or Part.)	
Total Assets	25 298.54	Total Liabilities and Net Worth	27.000

SUPPLEMENTARY SCHEDULES

Sch. 1. Banking Relations (A list of all bank accounts, including savings)

Name and Address of Bank	Balance	Loans, if any	Endorsed, Guaranteed or Secured
TD BANK	\$ 150.		
BANK OF AMERICA	\$ 1		
ALASKA USA FCU	\$ 1000		

Sch.2. Securities Owned (Stocks, Bonds, etc., but not mortgages)

Par Val. Or Shs.	Description	Cost	Pres. Mkt. Val	To Whom Pledged
155	Facebook	2044.50	14616.50	
77	Netflix	5005.00	9511.04	

Sch.3. Real Estate Owned – Mortgage Payable

Location and Description	Cost	Asses. Val.	Est. Val.	Mortgage Balance	Maturity
<i>None</i>					

Sch.4. Notes Payable – Due to Principals (Partners, Stockholders, Officers and Others)

Due To	Amount	Due Date	Due To	Amount	Due Date
<i>None</i>					

CONTINGENT LIABILITY. The undersigned has (have) no contingent liabilities as endorser, guarantor, or otherwise, except the following: (Give details.)

SUITS, JUDGMENTS AND OTHER LEGAL ACTIONS. There are no suits, judgments, or other legal actions outstanding or pending against the undersigned and to the best of the undersigned's knowledge no legal actions are to be started against undersigned, except as follows: (Give details.)

PLEDGE ASSIGNMENT, AND TRANSFER OF TITLE OR ASSETS. As of the date of the statement of assets and liabilities, included in this financial statement, the undersigned has (have) not pledged, assigned, hypothecated, or transferred the title of any of the assets as listed above, except as noted in the various schedules of this financial statement; and the undersigned has (have) not pledged, assigned, hypothecated, or transferred the title of any such assets, except as follows: (Give details.)

INSURANCE COVERAGE. - Fidelity Bond: Partners, Officers, Employees \$ 0;
 Indemnity Coverage: Robbery and Holdup \$ 0; Burglary \$ 0;
 Misplacement \$ 0; Forgery \$ 0;
 Errors and Omissions \$ 0; Public Liability \$ 0;
 Fire Insurance: Furn., Fix., and Equip. \$ 0
 Other Insurance (describe):

ACCOUNTING DATA. - If books are kept or audited please give name of
 accountant None; Indicate if Certified Public Accountant Yes;
 Frequency of Audits _____; Date of Last Audit Yes; Date of Fiscal
 Year-End _____; Did the accountant prepare the financial statement submitted
 herewith? N/A Are the figures shown the same as the auditor's
 figures? N/A If not, how do the figures differ (give details):

The undersigned has (have) carefully read the foregoing statements, and all printed and written
 matter therein, and hereby certifies that all the statements are known to me (us) to be true and
 give a correct showing of the undersigned financial conditions, and that the undersigned has
 (have) no liabilities, direct, or contingent, business or accommodation, except as set forth in said
 complete statement, and that the legal and equitable title to all assets therein set forth is in the
 name of the undersigned solely, except as otherwise noted therein.

Signed this August day of 8, 2015.

CHINO LTD
 Name of Entity

By: [Signature]
 Title: CEO, CHINO LTD
 By: _____
 Title: _____

By: _____
 Title: _____
 By: _____
 Title: _____

LITIGATION AFFIDAVIT
FOR INDIVIDUALS

STATE OF NEW YORK,

}
}
}
}

ss:

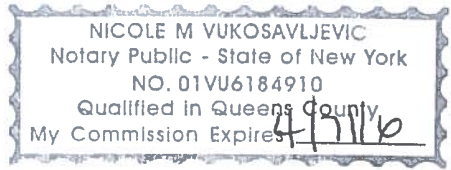
County of New York

I, THOM CHISNO, being duly sworn, depose and say:

That there are no arrests, indictments, criminal information or other criminal proceedings now pending against me as an individual, partner, director or officer of a corporation; that I have never been convicted of a crime in any jurisdiction in any of these capacities, that I have never been sued nor has any judgment been obtained against me in any of these capacities in any civil action in any jurisdiction; and that I have never been the subject of any administrative or disciplinary proceedings initiated by a regulatory or governmental agency in any of these capacities.

[Handwritten Signature]
Signature

Subscribed and sworn to before me this 7 day of August, 2015.



Nicole M. Vukosavljevic
Notary Public

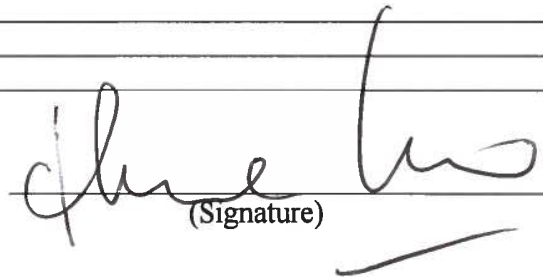
LITIGATION AFFIDAVIT
FOR LICENSEE/APPLICANT

I, Thao CHINO, the CEO of
(Print or type name) (Title)
CHINO LTD,

being duly sworn, depose and say:

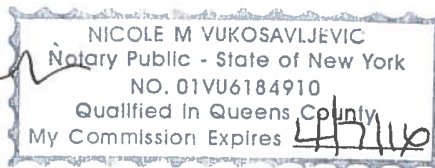
There are no indictments, criminal information or other criminal proceedings now pending against the licensee/applicant, that it has never been sued nor has any judgment been obtained against it in any civil action in any jurisdiction; and that it has never been the subject of any administrative or disciplinary proceedings initiated by a regulatory or governmental agency except as noted below.

N/A


(Signature)

Subscribed and sworn to before me this 7 day of August, 2015.


Notary Public



NEW YORK STATE DEPARTMENT OF FINANCIAL SERVICES
PERSONAL QUESTIONNAIRE
(Please Print or Type)

Please answer all questions, using "No," "None" or "Not Applicable" where necessary

1. Full Name: Thos B CHINO Soc. Sec. No.: —
First, Middle, Last

Have you ever been known by, or used, any other name? If so, list such name(s):

2. Home Address: 640 Riverside drive 1013
New York, NY 10031

How long at this address: 42 years

3. Previous Home Address(es) (immediately prior to present address for the last 15 years):

How long at this address: _____

4. Present Occupation:
Firm Name: _____
Business Address: _____
Nature of Business: _____
Title: _____
Telephone Number: _____
Email Address: _____
Name of Immediate Superior: _____

5. Date of Birth: 19 Aug 72 Place of Birth: FRANCE
Citizenship: USA Right-to-Work in USA: Yes No ()
Passport No.: N Visa Type: A
Country of Issue: _____ Expiration Date: _____

6.

<u>Education Awarded</u>	<u>Name and Address of School</u>	<u>Dates of Attendance</u>	<u>Major Area of Study</u>	<u>Degree Granted and Date</u>
High School				
College, University (Undergraduate)	N/A			
College, University (Graduate)				
Professional or Technical School				

7. Do you have a license to practice any profession:

Yes No

If "yes" give details:

- (a) Nature of License: New York Taxi & Limousine Comita
- (b) Date Issued: 6/11/2016 Number of license (if any): 5535449
- (c) Licensing Agency and Address: TLC

8. Employment Record for the last 15 years. Account for all gaps in employment. (Use additional sheets if necessary.)

<u>Name & Address of Employer</u>	<u>Dates of Employment</u>	<u>Position Held & Duties</u>	<u>Immediate Supervisor</u>	<u>Reason for Leaving</u>
<u>Not Disclosed</u>				

9. If self-employed, describe each enterprise, including the name, address, state of incorporation, your percentage of ownership and the type of business of each corporate or other entity which you own or control. (Control means ownership of 10% or more of the stock or the ability to effectively control the management of the corporation or other entity.)

List names, addresses and percentage of control and/or ownership of other incorporators, partners, directors or officers of the entity referred to above.

10. Are you employed in any professional capacity, or do you perform any services for or have any business connections with any institution which is subject to the supervision of the Department, or any agency or authority of the State of New York?

Not disclosing Yes No
 () ()

If "yes," indicate name of institution, address and nature of your work.

11. Have you had, or do you now have, any financial interest, direct or indirect, in any institution under the supervision of any authority or agency in New York State, or any other state?

No Yes No
 () ()

If "yes," give the name of the institution, address and nature of interest.

12. References:

(a) List the names and addresses of three personal references who can attest to your character, fitness and reputation. (State how long you have known each person; do not include relatives or current business associates.)

None

(b) List the names and addresses of three professional references who can attest to your character, fitness, reputation, professional competence and business skills.

13. List of checking, savings and any borrowing relationships in excess of \$10,000, for both personal and business purposes. (Use additional sheets if necessary.)

Name and address of Creditor/ Financial Institution	Account Number	Type of relationship (checking, savings, Personal/ business borrowing and so on)	Account balance / loan outstanding
None			

14. Answer yes to any of these questions if they apply to you as an individual, or as partner, director or officer of a corporation.

Except for minor traffic violations:

- | | Yes | No |
|---|-----|-----|
| (a) Are any arrests, indictments, criminal information or other criminal proceedings now pending against you? | () | (X) |
| (b) Were you ever convicted for any violation of law? | () | (X) |
| (c) Have you or has any partnership of which you were a member or any corporation of which you were a principal officer or major stockholder ever been adjudged a bankrupt or involved in a civil action either as a defendant or plaintiff (within the past 10 years)? | () | (X) |
| (d) Have you ever initiated or been named in any administrative or disciplinary proceedings? | () | (X) |
| (e) Has your salary ever been garnished (within the past 10 years)? | () | (X) |

If your answer to any of the above questions is "Yes", on a separate sheet of paper list the dates, name and location of the court of jurisdiction or administrative agency and a brief description of each action or charge and its disposition. Report all legal actions, regardless of disposition. Include copies of documents you have which provide information on any matters listed.

15. Has any enterprise in which you were a partner, director or officer been the subject of federal or state administrative proceedings, criminal indictment, criminal information or other criminal proceeding? () (X)

If your answer is "Yes", on a separate sheet of paper provide a description of each administrative or disciplinary proceeding and its disposition. Report all matters, regardless of disposition. Include copies of documents you have which provide information on any matters listed.

16. Have you and/or any enterprise in which you are a partner failed to file required federal, state and local tax returns for the previous three calendar years?

- | | | |
|-----|-----|-----|
| Yes | () | No |
| | () | (X) |

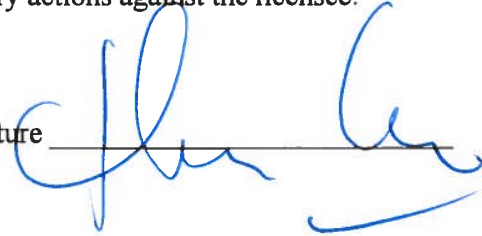
If your answer is "yes", on a separate sheet of paper, please explain the circumstances and include the date on which any applications for extension have been filed.

The undersigned affirms that the statements made and answers given herein are accurate and complete, and hereby authorizes the New York State Department of Financial Services to make any inquiry it deems appropriate in connection with processing this questionnaire. FALSE WRITTEN STATEMENTS IN THIS QUESTIONNAIRE ARE PUNISHABLE UNDER SECTION 210.45 OF THE NEW YORK PENAL LAW (making a punishable false written statement) and also as per the New York Financial Services Law and regulations, the Superintendent of Financial Services may initiate regulatory actions against the licensee.

Date

8/3/2015

Signature



**STATEMENT OF OWNERSHIP
OF LICENSED ENTITY ENGAGED IN VIRTUAL CURRENCY BUSINESS ACTIVITY**

I, The CHINO, being duly sworn, depose and state:

I. That I am an officer of the CHINO LTD Corporation,
namely CEO
(Title)

II. That in my capacity as such I have applied in the name of the corporation for a license to engage in Virtual Currency Business Activity.

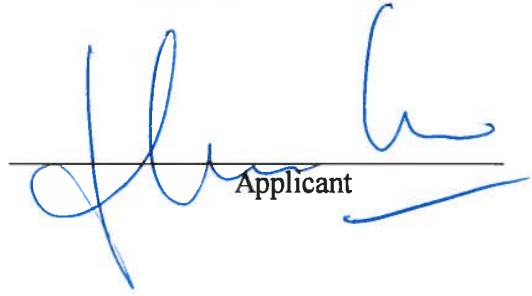
III. That the stock ownership of the CHINO LTD Corporation is distributed as follows:

The CHINO 100 %

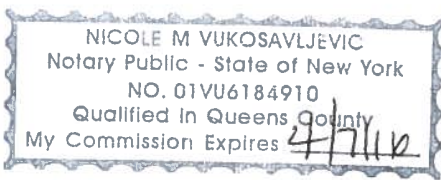
_____ %

and that no other persons will invest any funds in the Corporation nor share in the management or profits of the Corporation, either directly or indirectly.

IV. That I understand that false statements made in this affidavit under oath may result in the revocation of the Virtual Currency Business Activity license of CHINO LTD (entity name) and in prosecution for perjury.


Applicant

Subscribed and sworn to before me this 7 day of August, 20 15.



Nicole M Vukosavljevic
Notary Public

TAXPAYER IDENTIFICATION INFORMATION

Disclosure of this information by you is mandatory in order to complete the processing of your application. The authority to request personal information from you, including identifying numbers, and the authority to maintain such information from you, including identifying numbers, and the authority to maintain such information is found in Section 5 of the Tax Law. The principal purpose for which the information is collected is to enable the Department of Taxation and Finance to identify individuals, businesses and others who have been delinquent in filing tax returns or may have understated their tax liabilities and to generally identify persons affected by the taxes administered by the Commissioner of Taxation and Finance. The information will be used for tax administration purposes and for any other purpose authorized by the Tax Law.

(Print or Type information) (This form may be reproduced as necessary)

1. Social Security Number (complete only if applicant is other than a corporation. A separate form must be completed for each partner or associate).

— NOT Disclosing —

2. Employer Identification Code (for reporting wages of employees)

80 - 0961473

3. Legal Name (individual, partner or associate)

THEO CHINO

4. Trade Name (Doing business as D/B/A in license or application)

5. Street Address of Business (to be licensed or authorized)

640 Riverside Drive 10B

6. City New York 7. State NY

8. Zip and 4 Digit Code 10031

9. County New York

August 8, 2015.

To Whom it may concern,

With the present letter it is requested a waiver of the fee of \$5000 as Chino LTD is a small business entity in New York State and ~~does not~~ the fee represented 5000 of the current budget of the enterprise.

Sincerely,

Therese Chino
CEO Chino LTD

EXHIBIT “X”

**Conglomerate Business
Consultants, Inc.**

cbc 40 Wall Street - 28th Fl
New York, NY 10005
(888) 522-5211 - support@cbcna.co



01/04/2016

Receipt for:

INV-3911418406

Rehana's Wholesale

40 West 31st ST
New York, NY 10001
(212) 532-5271

Current Invoice: \$ 279.41

Past due Invoice: \$ 0.00

Bitcoin Received: \$ 1.94

We received the sum of

\$ 277.47


for the payment of the Nobel One
invoice.

Received by:

A handwritten signature in blue ink, appearing to be "Rehana", written over a horizontal line.

CBC, Inc / Rehana's Wholesale

Date:

January  2016



012678


 **bitcoin**

EXHIBIT “XI”



NEW YORK STATE
DEPARTMENT of
FINANCIAL SERVICES

Andrew M. Cuomo
Governor

Shirin Emami
Acting Superintendent

January 4, 2016

Chino Ltd.
640 Riverside Drive, 10B
New York, NY 10031

Attn: Theo Chino
Chief Executive Officer

RE: Chino Ltd.
Application for License to Engage in Virtual Currency Business Activity

Dear Mr. Chino:

The New York State Department of Financial Services (the "Department") has performed an initial review of the Virtual Currency Business Activity license application (the "Application") of Chino Ltd. (the "Company"). The Department notes that the submitted Application documentation is exceptionally limited. Among other issues, the Application does not contain any description of the Company's current or proposed business activity. Therefore, the Department is unable to evaluate whether the Company's current or intended business activity (if any) would be considered Virtual Currency Business Activity that requires licensing under the New York Financial Services Law and regulations (*see* 23 NYCRR Part 200). For that reason, the Application is herewith being returned to you without further processing by the Department.

The Department would emphasize that the instant letter does not offer any opinion as to whether or not any business activity of the Company requires or would require licensing in New York.

Should you have any questions, please contact me at Maharshi.Datta@dfs.ny.gov or (212) 709-1530.

Sincerely,

Maharshi Datta
Supervising Bank Examiner
Capital Markets Division
New York State Department of Financial Services
One State Street, New York, NY 10004-1511

Enclosure: Original Application

EXHIBIT “XII”

U.S. Income Tax Return for an S Corporation

Department of the Treasury
Internal Revenue Service

▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
▶ Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

2013

For calendar year 2013 or tax year beginning Nov 19, 2013, ending Dec 31, 2013

A S election effective date 11/19/13	TYPE OR PRINT	Name Chino Ltd	D Employer identification number 80-0961473
B Business activity code number (see instrs) 334110		Number, street, and room or suite no. If a P.O. box, see instructions. 640 RIVERSIDE DR	E Date incorporated 11/19/13
C Check if Schedule M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code APT 10B NY 10031	F Total assets (see instructions) \$ -4,390.

G Is the corporation electing to be an S corporation beginning with this tax year? Yes No If 'Yes,' attach Form 2553 if not already filed

H Check if: (1) Final return (2) Name change (3) Address change
(4) Amended return (5) S election termination or revocation

I Enter the number of shareholders who were shareholders during any part of the tax year ▶ **1**

Caution. Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

INCOME	1 a Gross receipts or sales	1 a	
	b Returns and allowances	1 b	
	c Balance. Subtract line 1b from line 1a	1 c	
	2 Cost of goods sold (attach Form 1125-A)	2	2,992.
	3 Gross profit. Subtract line 2 from line 1c	3	-2,992.
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4	
5 Other income (loss) (see instrs - att statement)	5		
6 Total income (loss). Add lines 3 through 5. ▶	6	-2,992.	
DEDUCTIONS SEE INSTRUCTIONS	7 Compensation of officers (see instructions - attach Form 1125-E)	7	
	8 Salaries and wages (less employment credits)	8	
	9 Repairs and maintenance	9	84.
	10 Bad debts	10	
	11 Rents	11	
	12 Taxes and licenses	12	71.
	13 Interest	13	24.
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14	
	15 Depletion (Do not deduct oil and gas depletion.)	15	
	16 Advertising	16	32.
	17 Pension, profit-sharing, etc, plans	17	
	18 Employee benefit programs	18	
	19 Other deductions (attach statement) * .STMT	19	1,164.
	20 Total deductions. Add lines 7 through 19 ▶	20	1,375.
	21 Ordinary business income (loss). Subtract line 20 from line 6	21	-4,367.
TAX AND PAYMENTS	22 a Excess net passive income or LIFO recapture tax (see instructions)	22 a	
	b Tax from Schedule D (Form 1120S)	22 b	
	c Add lines 22a and 22b (see instructions for additional taxes)	22 c	
	23 a 2013 estimated tax payments and 2012 overpayment credited to 2013	23 a	
	b Tax deposited with Form 7004	23 b	
	c Credit for federal tax paid on fuels (attach Form 4136)	23 c	
	d Add lines 23a through 23c	23 d	
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ <input type="checkbox"/>	24	
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25	
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26	
27 Enter amount from line 26 Credited to 2014 estimated tax ▶	27		

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: _____ Date: _____ CEO Title: _____

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____ Check if self-employed PTIN: _____

Firm's name: ▶ Self-Prepared Firm's EIN: ▶ _____

Firm's address: ▶ _____ Phone no.: _____

Schedule B Other Information (see instructions)	Yes	No		
1 Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶ _____				
2 See the instructions and enter the: a Business activity. ▶ <u>Manufacturing</u> b Product or service. ▶ <u>Point of Sale Equipment</u>				
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation		X		
4a At the end of the tax year, did the corporation: Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X		
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X		
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum % Owned in Profit, Loss, or Capital
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below.		X		
(i) Total shares of restricted stock ▶ _____				
(ii) Total shares of non-restricted stock ▶ _____				
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below.		X		
(i) Total shares of stock outstanding at the end of the tax year ▶ _____				
(ii) Total shares of stock outstanding if all instruments were executed ▶ _____				
6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?		X		
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶ <input type="checkbox"/> If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.				
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years (see instructions) ▶ \$ _____				
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year. \$ _____				
10 Does the corporation satisfy both of the following conditions? a The corporation's total receipts (see instructions) for the tax year were less than \$250,000 b The corporation's total assets at the end of the tax year were less than \$250,000 If "Yes," the corporation is not required to complete Schedules L and M-1.	X			
11 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction \$ _____		X		
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X		
13a Did the corporation make any payments in 2013 that would require it to file Form(s) 1099?		X		
b If "Yes," did the corporation file or will it file required Forms 1099?				

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	-4,367.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3 a Other gross rental income (loss) 3 a		
	b Expenses from other rental activities (attach statement) 3 b		
	c Other net rental income (loss). Subtract line 3b from line 3a	3 c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends 5 a		
	b Qualified dividends 5 b		
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
8 a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8 a		
	b Collectibles (28%) gain (loss) 8 b		
	c Unrecaptured section 1250 gain (attach statement) 8 c		
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
Deductions	12 a Charitable contributions	12 a	
	b Investment interest expense	12 b	
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12 c (2)	
	d Other deductions (see instructions) Type ▶	12 d	
Credits	13 a Low-income housing credit (section 42(j)(5))	13 a	
	b Low-income housing credit (other)	13 b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13 c	
	d Other rental real estate credits (see instrs) Type ▶	13 d	
	e Other rental credits (see instrs) Type ▶	13 e	
	f Biofuel producer credit (attach Form 6478)	13 f	
	g Other credits (see instructions) Type ▶	13 g	
Foreign Transactions	14 a Name of country or U.S. possession ▶		
	b Gross income from all sources	14 b	
	c Gross income sourced at shareholder level	14 c	
	Foreign gross income sourced at corporate level		
	d Passive category	14 d	
	e General category	14 e	
	f Other (attach statement)	14 f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense	14 g	
	h Other	14 h	
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category	14 i	
	j General category	14 j	
	k Other (attach statement)	14 k	
Other information			
l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14 l		
m Reduction in taxes available for credit (attach statement)	14 m		
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) items	15 a Post-1986 depreciation adjustment	15 a	
	b Adjusted gain or loss	15 b	
	c Depletion (other than oil and gas)	15 c	
	d Oil, gas, and geothermal properties — gross income	15 d	
	e Oil, gas, and geothermal properties — deductions	15 e	
	f Other AMT items (attach statement)	15 f	
Items Affecting Shareholder Basis	16 a Tax-exempt interest income	16 a	
	b Other tax-exempt income	16 b	
	c Nondeductible expenses	16 c	23.
	d Distributions (attach stmt if required) (see instrs)	16 d	
	e Repayment of loans from shareholders	16 e	

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Other Information	17 a Investment income	17 a	
	b Investment expenses	17 b	
	c Dividend distributions paid from accumulated earnings and profits	17 c	
	d Other items and amounts (attach statement)		
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and lines 14l	18	-4,367.

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				0.
2 a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach stmt)				
7	Loans to shareholders				-4,390.
8	Mortgage and real estate loans				
9	Other investments (attach statement)				
10 a	Buildings and other depreciable assets			0.	
b	Less accumulated depreciation			0.	0.
11 a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				0.
13 a	Intangible assets (amortizable only)			0.	
b	Less accumulated amortization			0.	0.
14	Other assets (attach stmt)				
15	Total assets				-4,390.
Liabilities and Shareholders' Equity					
16	Accounts payable				0.
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach stmt)				
19	Loans from shareholders				0.
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings				-4,390.
25	Adjustments to shareholders' equity (att stmt)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity.				-4,390.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note. Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more – see instructions

1 Net income (loss) per books	-4,390.	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		a Tax-exempt interest \$ _____	

3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12, and 14l (itemize):		6 Deductions included on Schedule K, lines 1 through 12, and 14l, not charged against book income this year (itemize):	
a Depreciation \$ _____		a Depreciation . . \$ _____	
b Travel and entertainment. \$ _____ 23.			

	23.	7 Add lines 5 and 6.	
4 Add lines 1 through 3.	-4,367.	8 Income (loss) (Schedule K, ln 18). Ln 4 less ln 7 . . .	-4,367.

Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year			
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	4,367.		
5 Other reductions * .STMT.	23.		
6 Combine lines 1 through 5	-4,390.		
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6.	-4,390.		

EXHIBIT “XIII”

U.S. Income Tax Return for an S Corporation

Department of the Treasury
Internal Revenue Service

▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
▶ Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

2014

For calendar year 2014 or tax year beginning _____, 2014, ending _____

A S election effective date 11/19/13	TYPE OR PRINT	Name Chino Ltd	D Employer identification number 80-0961473
B Business activity code number (see instrs) 334110		Number, street, and room or suite no. If a P.O. box, see instructions. 640 RIVERSIDE DR	E Date incorporated 11/19/13
C Check if Schedule M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code APT 10B NY 10031	F Total assets (see instructions) \$ 3,040.

G Is the corporation electing to be an S corporation beginning with this tax year? Yes No If 'Yes,' attach Form 2553 if not already filed

H Check if: (1) Final return (2) Name change (3) Address change
(4) Amended return (5) S election termination or revocation

I Enter the number of shareholders who were shareholders during any part of the tax year ▶ **1**

Caution. Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

I N C O M E	1 a Gross receipts or sales	1 a	
	b Returns and allowances	1 b	
	c Balance. Subtract line 1b from line 1a	1 c	
	2 Cost of goods sold (attach Form 1125-A)	2	
	3 Gross profit. Subtract line 2 from line 1c	3	
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4	
5 Other income (loss) (see instrs — att statement)	5		
6 Total income (loss). Add lines 3 through 5. ▶	6		
D E D U C T I O N S S E E I N S T R U C T I O N S	7 Compensation of officers (see instructions - attach Form 1125-E)	7	
	8 Salaries and wages (less employment credits)	8	6,812.
	9 Repairs and maintenance	9	
	10 Bad debts	10	
	11 Rents	11	137.
	12 Taxes and licenses	12	598.
	13 Interest	13	2,374.
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14	
	15 Depletion (Do not deduct oil and gas depletion.)	15	
	16 Advertising	16	449.
	17 Pension, profit-sharing, etc, plans	17	
	18 Employee benefit programs	18	
	19 Other deductions (attach statement) * .STMT	19	49,297.
	20 Total deductions. Add lines 7 through 19 ▶	20	59,667.
21 Ordinary business income (loss). Subtract line 20 from line 6	21	-59,667.	
T A X A N D P A Y M E N T S	22 a Excess net passive income or LIFO recapture tax (see instructions)	22 a	
	b Tax from Schedule D (Form 1120S)	22 b	
	c Add lines 22a and 22b (see instructions for additional taxes)	22 c	
	23 a 2014 estimated tax payments and 2013 overpayment credited to 2014	23 a	
	b Tax deposited with Form 7004	23 b	
	c Credit for federal tax paid on fuels (attach Form 4136)	23 c	
	d Add lines 23a through 23c	23 d	
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ <input type="checkbox"/>	24	
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25	
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26	
27 Enter amount from line 26 Credited to 2015 estimated tax ▶ Refunded ▶	27		

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____ CEO _____ Title _____

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____

Firm's name ▶ Self-Prepared Firm's EIN ▶ _____

Firm's address ▶ _____ Phone no. _____

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶ _____						
2 See the instructions and enter the: a Business activity. ▶ <u>Manufacturing</u> b Product or service. ▶ <u>Point of Sale Equipment</u>						
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation: a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum % Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below.						X
(i) Total shares of restricted stock ▶ _____						
(ii) Total shares of non-restricted stock ▶ _____						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below.						X
(i) Total shares of stock outstanding at the end of the tax year ▶ _____						
(ii) Total shares of stock outstanding if all instruments were executed ▶ _____						
6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶ <input type="checkbox"/> If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years (see instructions) ▶ \$ _____						
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year. \$ _____						
10 Does the corporation satisfy both of the following conditions?						
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000					X	
b The corporation's total assets at the end of the tax year were less than \$250,000 If "Yes," the corporation is not required to complete Schedules L and M-1.						
11 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction \$ _____						X
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions						X
13 a Did the corporation make any payments in 2014 that would require it to file Form(s) 1099?						X
b If "Yes," did the corporation file or will it file required Forms 1099?						

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	-59,667.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3 a Other gross rental income (loss) 3 a		
	b Expenses from other rental activities (attach statement) 3 b		
	c Other net rental income (loss). Subtract line 3b from line 3a	3 c	
	4 Interest income	4	0.
	5 Dividends: a Ordinary dividends 5 a		
	b Qualified dividends 5 b		
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
8 a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8 a		
	b Collectibles (28%) gain (loss) 8 b		
	c Unrecaptured section 1250 gain (attach statement) 8 c		
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
Deductions	12 a Charitable contributions	12 a	
	b Investment interest expense	12 b	
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12 c (2)	
	d Other deductions (see instructions) Type ▶	12 d	
Credits	13 a Low-income housing credit (section 42(j)(5))	13 a	
	b Low-income housing credit (other)	13 b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13 c	
	d Other rental real estate credits (see instrs) Type ▶	13 d	
	e Other rental credits (see instrs) Type ▶	13 e	
	f Biofuel producer credit (attach Form 6478)	13 f	
	g Other credits (see instructions) Type ▶	13 g	
Foreign Transactions	14 a Name of country or U.S. possession ▶		
	b Gross income from all sources	14 b	
	c Gross income sourced at shareholder level	14 c	
	Foreign gross income sourced at corporate level		
	d Passive category	14 d	
	e General category	14 e	
	f Other (attach statement)	14 f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense	14 g	
	h Other	14 h	
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category	14 i	
	j General category	14 j	
	k Other (attach statement)	14 k	
Other information			
l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14 l		
m Reduction in taxes available for credit (attach statement)	14 m		
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) items	15 a Post-1986 depreciation adjustment	15 a	
	b Adjusted gain or loss	15 b	
	c Depletion (other than oil and gas)	15 c	
	d Oil, gas, and geothermal properties — gross income	15 d	
	e Oil, gas, and geothermal properties — deductions	15 e	
	f Other AMT items (attach statement)	15 f	
Items Affecting Shareholder Basis	16 a Tax-exempt interest income	16 a	0.
	b Other tax-exempt income	16 b	
	c Nondeductible expenses	16 c	
	d Distributions (attach stmt if required) (see instrs)	16 d	
	e Repayment of loans from shareholders	16 e	

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Other Information	17 a Investment income	17 a	
	b Investment expenses	17 b	
	c Dividend distributions paid from accumulated earnings and profits	17 c	
	d Other items and amounts (attach statement)		
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l	18	-59,667.

	Schedule L Balance Sheets per Books		Total amount	
	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		0.		
2 a Trade notes and accounts receivable				
b Less allowance for bad debts				
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities (see instructions)				
6 Other current assets (attach stmt)				2,579.
7 Loans to shareholders		-4,390.		
8 Mortgage and real estate loans				
9 Other investments (attach statement)				
10 a Buildings and other depreciable assets	0.		461.	
b Less accumulated depreciation	0.	0.	0.	461.
11 a Depletable assets				
b Less accumulated depletion				
12 Land (net of any amortization)		0.		0.
13 a Intangible assets (amortizable only)	0.		0.	
b Less accumulated amortization	0.	0.	0.	0.
14 Other assets (attach stmt)				
15 Total assets		-4,390.		3,040.
Liabilities and Shareholders' Equity				
16 Accounts payable		0.		
17 Mortgages, notes, bonds payable in less than 1 year				
18 Other current liabilities (attach stmt)				785.
19 Loans from shareholders		0.		66,312.
20 Mortgages, notes, bonds payable in 1 year or more				
21 Other liabilities (attach statement)				
22 Capital stock				
23 Additional paid-in capital				
24 Retained earnings		-4,390.		-64,057.
25 Adjustments to shareholders' equity (att stmt)				
26 Less cost of treasury stock				
27 Total liabilities and shareholders' equity		-4,390.		3,040.

EXHIBIT “XIV”

U.S. Income Tax Return for an S Corporation

Department of the Treasury
Internal Revenue Service

▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
▶ Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

2015

For calendar year 2015 or tax year beginning _____, 2015, ending _____,

A S election effective date 11/19/13	TYPE OR PRINT	Name Chino Ltd	D Employer identification number 80-0961473
B Business activity code number (see instrs) 334110		Number, street, and room or suite no. If a P.O. box, see instructions. 640 RIVERSIDE DR	E Date incorporated 11/19/13
C Check if Schedule M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code APT 10B NY 10031	F Total assets (see instructions) \$ 3,509.

G Is the corporation electing to be an S corporation beginning with this tax year? Yes No If 'Yes,' attach Form 2553 if not already filed

H Check if: (1) Final return (2) Name change (3) Address change
(4) Amended return (5) S election termination or revocation

I Enter the number of shareholders who were shareholders during any part of the tax year ▶ **1**

Caution. Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

I N C O M E	1 a Gross receipts or sales	1 a	-12.	
	b Returns and allowances	1 b		
	c Balance. Subtract line 1b from line 1a	1 c		-12.
	2 Cost of goods sold (attach Form 1125-A)	2		
	3 Gross profit. Subtract line 2 from line 1c	3		-12.
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4		
5 Other income (loss) (see instrs - att statement)	5			
6 Total income (loss). Add lines 3 through 5. ▶	6			-12.
D E D U C T I O N S S E E I N S T R U C T I O N S	7 Compensation of officers (see instructions - attach Form 1125-E)	7		
	8 Salaries and wages (less employment credits)	8		
	9 Repairs and maintenance	9		
	10 Bad debts	10		
	11 Rents	11		5,568.
	12 Taxes and licenses	12		236.
	13 Interest	13		2,608.
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14		
	15 Depletion (Do not deduct oil and gas depletion.)	15		
	16 Advertising	16		
	17 Pension, profit-sharing, etc, plans	17		
	18 Employee benefit programs	18		
	19 Other deductions (attach statement) * .STMT	19		22,164.
	20 Total deductions. Add lines 7 through 19 ▶	20		30,576.
21 Ordinary business income (loss). Subtract line 20 from line 6	21		-30,588.	
T A X A N D P A Y M E N T S	22 a Excess net passive income or LIFO recapture tax (see instructions)	22 a		
	b Tax from Schedule D (Form 1120S)	22 b		
	c Add lines 22a and 22b (see instructions for additional taxes)	22 c		
	23 a 2015 estimated tax payments and 2014 overpayment credited to 2015	23 a		
	b Tax deposited with Form 7004	23 b		0.
	c Credit for federal tax paid on fuels (attach Form 4136)	23 c		
	d Add lines 23a through 23c	23 d		0.
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ <input type="checkbox"/>	24		
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25		0.
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26		
27 Enter amount from line 26 Credited to 2016 estimated tax ▶ Refunded ▶ 27	27			

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____ CEO _____ Title _____

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____

Firm's name ▶ **Self-Prepared** Firm's EIN ▶ _____

Firm's address ▶ _____ Phone no. _____

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶ _____						
2 See the instructions and enter the: a Business activity. ▶ <u>Manufacturing</u> b Product or service. ▶ <u>Point of Sale Equipment</u>						
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation: a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum % Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below.						X
(i) Total shares of restricted stock ▶ _____						
(ii) Total shares of non-restricted stock ▶ _____						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below.						X
(i) Total shares of stock outstanding at the end of the tax year ▶ _____						
(ii) Total shares of stock outstanding if all instruments were executed ▶ _____						
6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶ <input type="checkbox"/> If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years (see instructions) ▶ \$ _____						
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year. \$ _____						
10 Does the corporation satisfy both of the following conditions?						
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000					X	
b The corporation's total assets at the end of the tax year were less than \$250,000 If "Yes," the corporation is not required to complete Schedules L and M-1.						
11 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?						X
If "Yes," enter the amount of principal reduction \$ _____						
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions						X
13 a Did the corporation make any payments in 2015 that would require it to file Form(s) 1099?						X
b If "Yes," did the corporation file or will it file required Forms 1099?						

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	-30,588.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3 a Other gross rental income (loss) 3 a		
	b Expenses from other rental activities (attach statement) 3 b		
	c Other net rental income (loss). Subtract line 3b from line 3a	3 c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends 5 a		
	b Qualified dividends 5 b		
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
8 a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8 a		
	b Collectibles (28%) gain (loss) 8 b		
	c Unrecaptured section 1250 gain (attach statement) 8 c		
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) Type ▶	10	
Deductions	11 Section 179 deduction (attach Form 4562)	11	
	12 a Charitable contributions	12 a	
	b Investment interest expense	12 b	
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12 c (2)	
d Other deductions (see instructions) Type ▶	12 d		
Credits	13 a Low-income housing credit (section 42(j)(5))	13 a	
	b Low-income housing credit (other)	13 b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13 c	
	d Other rental real estate credits (see instrs) Type ▶	13 d	
	e Other rental credits (see instrs) Type ▶	13 e	
	f Biofuel producer credit (attach Form 6478)	13 f	
	g Other credits (see instructions) Type ▶	13 g	
Foreign Transactions	14 a Name of country or U.S. possession ▶		
	b Gross income from all sources	14 b	
	c Gross income sourced at shareholder level	14 c	
	Foreign gross income sourced at corporate level		
	d Passive category	14 d	
	e General category	14 e	
	f Other (attach statement)	14 f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense	14 g	
	h Other	14 h	
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category	14 i	
	j General category	14 j	
	k Other (attach statement)	14 k	
Other information			
l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14 l		
m Reduction in taxes available for credit (attach statement)	14 m		
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) items	15 a Post-1986 depreciation adjustment	15 a	
	b Adjusted gain or loss	15 b	
	c Depletion (other than oil and gas)	15 c	
	d Oil, gas, and geothermal properties — gross income	15 d	
	e Oil, gas, and geothermal properties — deductions	15 e	
	f Other AMT items (attach statement)	15 f	
Items Affecting Shareholder Basis	16 a Tax-exempt interest income	16 a	
	b Other tax-exempt income	16 b	
	c Nondeductible expenses	16 c	
	d Distributions (attach stmt if required) (see instrs)	16 d	
	e Repayment of loans from shareholders	16 e	

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Other Information	17 a Investment income	17 a	
	b Investment expenses	17 b	
	c Dividend distributions paid from accumulated earnings and profits	17 c	
	d Other items and amounts (attach statement)		
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l	18	-30,588.

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		0.		70.
2 a	Trade notes and accounts receivable				
	b Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach stmt)		2,579.		2,579.
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)				
10 a	Buildings and other depreciable assets	461.		860.	
	b Less accumulated depreciation	0.	461.	0.	860.
11 a	Depletable assets				
	b Less accumulated depletion				
12	Land (net of any amortization)		0.		0.
13 a	Intangible assets (amortizable only)	0.		0.	
	b Less accumulated amortization	0.	0.	0.	0.
14	Other assets (attach stmt)				
15	Total assets		3,040.		3,509.
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach stmt)		785.		
19	Loans from shareholders		66,312.		98,154.
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings		-64,057.		-94,645.
25	Adjustments to shareholders' equity (att stmt)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity		3,040.		3,509.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note. The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books	-30,588.	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		a Tax-exempt interest \$ _____	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12, and 14l (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14l, not charged against book income this year (itemize):	
a Depreciation \$ _____		a Depreciation . . . \$ _____	
b Travel and entertainment \$ _____		7 Add lines 5 and 6	
4 Add lines 1 through 3	-30,588.	8 Income (loss) (Schedule K, ln 18). Ln 4 less ln 7 . . .	-30,588.

Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year	-64,057.	0.	
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	30,588.		
5 Other reductions			
6 Combine lines 1 through 5	-94,645.	0.	
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6	-94,645.	0.	

EXHIBIT “XV”

U.S. Income Tax Return for an S Corporation

Department of the Treasury
Internal Revenue Service

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

2016

For calendar year 2016 or tax year beginning _____, 2016, ending _____, 20

A S election effective date 11/19/2013	TYPE OR PRINT	Name Chino Ltd	D Employer identification number 80-0961473
B Business activity code number (see instructions) 334110		Number, street, and room or suite no. If a P.O. box, see instructions. 640 RIVERSIDE DR 10B	E Date incorporated 11/19/2013
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code New York NY 10031	F Total assets (see instructions) \$ 3,509.

G Is the corporation electing to be an S corporation beginning with this tax year? Yes No If "Yes," attach Form 2553 if not already filed
H Check if: (1) Final return (2) Name change (3) Address change (4) Amended return (5) S election termination or revocation
I Enter the number of shareholders who were shareholders during any part of the tax year ▶ 1

Caution: Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1 a Gross receipts or sales	1a		
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a			1c
	2 Cost of goods sold (attach Form 1125-A)			2
	3 Gross profit. Subtract line 2 from line 1c			3
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)			4
5 Other income (loss) (see instructions—attach statement)			5	
6 Total income (loss). Add lines 3 through 5			6	
Deductions (see instructions for limitations)	7 Compensation of officers (see instructions—attach Form 1125-E)			7
	8 Salaries and wages (less employment credits)			8 7.
	9 Repairs and maintenance			9
	10 Bad debts			10 373.
	11 Rents			11 7,994.
	12 Taxes and licenses			12 1,171.
	13 Interest			13 5,270.
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			14
	15 Depletion (Do not deduct oil and gas depletion.)			15
	16 Advertising			16 454.
	17 Pension, profit-sharing, etc., plans			17
	18 Employee benefit programs			18
	19 Other deductions (attach statement) <i>See Statement</i>			19 37,784.
	20 Total deductions. Add lines 7 through 19			20 53,053.
	21 Ordinary business income (loss). Subtract line 20 from line 6			21 -53,053.
Tax and Payments	22 a Excess net passive income or LIFO recapture tax (see instructions)	22a		
	b Tax from Schedule D (Form 1120S)	22b		
	c Add lines 22a and 22b (see instructions for additional taxes)			22c
	23 a 2016 estimated tax payments and 2015 overpayment credited to 2016	23a		
	b Tax deposited with Form 7004	23b	0.	
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Add lines 23a through 23c			23d 0.
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>			24
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed			25 0.
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid			26
27 Enter amount from line 26 Credited to 2017 estimated tax ▶ Refunded ▶			27	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: _____ Date: 04/17/2017 Title: CEO
 May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	PTIN
	Firm's name ▶ Self-Prepared			Check <input type="checkbox"/> if self-employed
	Firm's address ▶			Firm's EIN ▶
				Phone no.

For Paperwork Reduction Act Notice, see separate instructions. Form **1120S** (2016)

Schedule B Other Information (see instructions)

1 Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶ _____	Yes	No
2 See the instructions and enter the: a Business activity ▶ <u>Manufacturing</u> b Product or service ▶ <u>Point of Sale Equipment</u>		
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation		X
4 At the end of the tax year, did the corporation: a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below	Yes	No
		X

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital

5 a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below. (i) Total shares of restricted stock. ▶ _____ (ii) Total shares of non-restricted stock ▶ _____	Yes	No
		X

b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below. (i) Total shares of stock outstanding at the end of the tax year ▶ _____ (ii) Total shares of stock outstanding if all instruments were executed ▶ _____	Yes	No
		X

6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?	Yes	No
		X

7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/> If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.	Yes	No

8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years (see instructions) ▶ \$ _____	Yes	No

9 Enter the accumulated earnings and profits of the corporation at the end of the tax year. \$ _____	Yes	No

10 Does the corporation satisfy both of the following conditions? a The corporation's total receipts (see instructions) for the tax year were less than \$250,000 b The corporation's total assets at the end of the tax year were less than \$250,000 If "Yes," the corporation is not required to complete Schedules L and M-1.	Yes	No
	X	

11 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction \$ _____	Yes	No
		X

12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions	Yes	No
		X

13 a Did the corporation make any payments in 2016 that would require it to file Form(s) 1099?	Yes	No
		X
b If "Yes," did the corporation file or will it file required Forms 1099?		

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	-53,053.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) . . . Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
Credits	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type ▶ ----- (2) Amount ▶	12c(2)	
	d Other deductions (see instructions) . . . Type ▶	12d	
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c	
Foreign Transactions	d Other rental real estate credits (see instructions) Type ▶	13d	
	e Other rental credits (see instructions) . . . Type ▶	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type ▶	13g	
	14a Name of country or U.S. possession ▶ -----		
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level	14c	
	Foreign gross income sourced at corporate level		
	d Passive category	14d	
	e General category	14e	
	f Other (attach statement)	14f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense	14g	
	h Other	14h	
Deductions allocated and apportioned at corporate level to foreign source income			
i Passive category	14i		
j General category	14j		
k Other (attach statement)	14k		
Other information			
l Total foreign taxes (check one): ▶ <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14l		
m Reduction in taxes available for credit (attach statement)	14m		
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties—gross income	15d	
	e Oil, gas, and geothermal properties—deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required) (see instructions)	16d	
	e Repayment of loans from shareholders	16e	

Schedule K		Shareholders' Pro Rata Share Items (continued)	Total amount	
Other Information	17a	Investment income	17a	
	b	Investment expenses	17b	
	c	Dividend distributions paid from accumulated earnings and profits	17c	
	d	Other items and amounts (attach statement)		
Reconciliation	18	Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14!	18	-53,053.

Schedule L		Balance Sheets per Books		Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)		
Assets							
1	Cash		445.		70.		
2a	Trade notes and accounts receivable						
b	Less allowance for bad debts	()		()			
3	Inventories						
4	U.S. government obligations						
5	Tax-exempt securities (see instructions)						
6	Other current assets (attach statement) In . 6 . St		2,579.		2,579.		
7	Loans to shareholders						
8	Mortgage and real estate loans						
9	Other investments (attach statement)						
10a	Buildings and other depreciable assets	859.		860.			
b	Less accumulated depreciation	(0.)	859.	()	860.		
11a	Depletable assets						
b	Less accumulated depletion	()		()			
12	Land (net of any amortization)		0.		0.		
13a	Intangible assets (amortizable only)	0.		0.			
b	Less accumulated amortization	(0.)	0.	(0.)	0.		
14	Other assets (attach statement)						
15	Total assets		3,883.		3,509.		
Liabilities and Shareholders' Equity							
16	Accounts payable						
17	Mortgages, notes, bonds payable in less than 1 year						
18	Other current liabilities (attach statement)						
19	Loans from shareholders		98,528.		151,207.		
20	Mortgages, notes, bonds payable in 1 year or more						
21	Other liabilities (attach statement)						
22	Capital stock						
23	Additional paid-in capital						
24	Retained earnings		-94,645.		-147,698.		
25	Adjustments to shareholders' equity (attach statement)						
26	Less cost of treasury stock		()		()		
27	Total liabilities and shareholders' equity		3,883.		3,509.		

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note: The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books	-53,053.	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize) _____		a Tax-exempt interest \$ _____	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14I (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14I, not charged against book income this year (itemize):	
a Depreciation \$ _____		a Depreciation \$ _____	
b Travel and entertainment \$ _____			
4 Add lines 1 through 3	-53,053.	7 Add lines 5 and 6	
		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	-53,053.

Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year	-95,018.	0.	
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	(53,053.)		
5 Other reductions	()	()	
6 Combine lines 1 through 5	-148,071.	0.	
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6	-148,071.	0.	