

**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040[| LOGOUT |](#)**Business Corporation
Annual Report**

Filing Period: January 1 - March 1



Help with this form

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2010**1. Corporate ID No.** 000110795**2. Name of Corporation** BHAV Liquors, Inc.**3. Street Address Principal Business Office:**No. and Street: 746 BROADWAYCity or Town: PAWTUCKETState: RIZip: 02860Country: USA**4. Business Phone No.**(401) 725-1413**5. State of Incorporation**State: RI**6. Brief Description of the Character of Business Conducted in Rhode Island**THE WHOLESALE AND RETAIL SALE OF LIQUOR, INCLUDING, BUT NOT LIMITED TO,
BEER AND WINE.**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Delete	Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country

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CORPORATIONS DIV
2010 JAN 32 AM 9:26

<input type="checkbox"/>	PRESIDENT	SUSHILA H PATEL	510 NORTH EASTERN AVENUE FALL RIVER, MA 02723- USA
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Select From Below Title:

First Name:	Middle Name:	Last Name:	Suffix:
Address:	City:	State:	Zip:
			Country:
			<input type="button" value="Clear"/> <input type="button" value="Add"/>

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.00	1,000.00	1,000.00

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: Hemansu Patel

Business Name: Rick s Liquor

No. and Street: 746 Broadway

- Same Address as -

City or Town: Pawtucket

State: RI

Zip: 02861

Country: USA

Contact Phone: (401) 725-1413 ext:

Contact Email:

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

Signed this 26 Day of January, 2010 at 6:31:04 AM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By

Signature of Authorized Representative of the Corporation

Title ~~President~~ President**FILED**

FEB 01 2010

BY

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This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.