

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • Filing Fee: \$50.00° • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* 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&rd)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 655237		2. Name of Corporation OM SAI, INC.				
3. Street Address Principal Business Office 1557 West Main Road			City Portsmouth	State RI	^{Ζφ} 02871	
4. Business Phone No. 5. State of Incorporation Rhode Island						
6. Brief Description of the Ch Retail Sale of Alcohol	paracter of Business Conduction lic Beverages and Sp	ted in Rhode Island birits				
7. NAMES AND ADDR President Name	ESSES OF THE OFFI	CERS: ("X" BOX FOR ATTA	CHMENT) TILL IN Vice President Name	SPACES BEFORE USING	ATTACHMENTS	
llesh R. Patel			llesh R. Patel			
Street Address 30 Southwest Avenue			Street Address 30 Southwest Avenue			
City Jamestown	State RI	^{Zip} 02835	City Jamestown	State RI	^{Zip} 02835	
Secretary Name Ilesh R. Patel			Treasurer Name Ilesh R. Patel			
Street Address 30 Southwest Avenue			Street Address 30 Southwest Avenue			
City Jamestown	State RI	^{Zip} 02835	City Jamestown	State RI	^{Zip} 02835	
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Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	Clty	State	Zip	
Director Name			Director Name		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Street Address			Street Address			
				State		
City	. State	Zip	City:	State	50<	
9. Shares authori	200			O ("X" BOX FOR ATTAC		
			Number of Shares	SECTION MUST BE COMPLETED Class/Series	Por Value	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			1000	Common	No Par	
			Maria de la Caracteria de			
This report must be ex	vecuted on behalf of t	the corporation by an authoriz	ed representative. If the	corporation is in the hand	ds of a receiver or trustee.	
		ne corporation by the receiver		, vo.po		
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		FILED 8		f -avive. I dealers and office	that I have examined this rep	
		JAN 3 0 2012	including any ac	companying schedules and s	tatements, and that all statements	
File Date	n	D HOLD	contained heres	are true and correct.	1/24/12	
		***	Signature		Date	
Check No.			llesh R. Pa			
Ву:		<u>- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. </u>	Print or Type Na. President	171E		
FOR SECRETAL	RY OF STATE USE ONLY		Title			
<u> </u>					Form 630 Rev. 08/08	