STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ **Email:** corporations@sos.ri.gov ~ **Website:** www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • **This report must be typed or printed legibly.**
Filing Fee: $50.00 • **FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the Corporation		
164938	STS Sales Inc		
3. Principal office address: 35 Martins Way	City: Lincoln	State: R.I	Zip: 02865
4. Business Phone No.: 401-475-6232	5. State of Incorporation: R-I		
6. Brief description of the character of business conducted in Rhode Island: 7-Eleven Inc, convient Store			

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name			Vice-President Name		
SYED TAHIRALI SHAH			SYED TAHIRALI SHAH		
Street Address: 35 Martins Way			Street Address: 35 Martins Way		
City: Lincoln	State: R-I	Zip: 02865	City: Lincoln	State: R-I	Zip: 02865
Secretary Name: SYED TAHIRALI SHAH			Treasurer Name: SYED TAHIRALI SHAH		
Street Address: 35 Martins Way			Street Address: 35 Martins Way		
City: Lincoln	State: R-I	Zip: 02865	City: Lincoln	State: R-I	Zip: 02865

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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CORPORATIONS DIV
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9. SHARES AUTHORIZED	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
	NUMBER OF SHARES	CLASS/SERIES	PAR 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.	0		

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.

File Date
Check No
By:
FOR SECRETARY OF STATE USE ONLY

FILED
MAR 20 2012
166719

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Representative — Date: 03/20/12

SYED TAHIRALI SHAH
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012
74582-1-736437