



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. 146975		2. Exact name of the Corporation ANERI REALTY, INC.			
3. Principal office address 1100 Main Street		City Coventry	State RI	Zip 02816	
4. Business Phone No.		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island TO BUY, SELL, MANAGE, RENT, INVEST IN, REHABILITATE, IMPROVE AND DEVELOP REAL ESTATE					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name BHADRESH PATEL			Vice-President Name ARVIND PATEL		
Street Address 3951 AMBOY ROAD			Street Address 9 COLONY DRIVE		
City STATEN ISLAND	State NY	Zip 10308	City MARLBORO	State NJ	Zip 07746
Secretary Name ARVIND PATEL			Treasurer Name BHADRESH PATEL		
Street Address 9 COLONY DRIVE			Street Address 3951 AMBOY ROAD		
City MARLBORO	State NJ	Zip 07746	City STATEN ISLAND	State NY	Zip 10308
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name BHADRESH PATEL			Director Name ARVIND PATEL		
Street Address 3951 AMBOY ROAD			Street Address 9 COLONY DRIVE		
City STATEN ISLAND	State NY	Zip 10308	City MARLBORO	State NJ	Zip 07746
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	COMMON	NO PAR VALUE

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 BY 12-123502

FILED

JUN 26 2012

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.

Arvind Patel 6-21-12
Signature of Authorized Representative Date

ARVIND PATEL
Print or Type Name of Authorized Representative