



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

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR:** 2016

**1. Corporate ID No.** 000135470

**2. Name of Corporation** NAMASKAR INDIA

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 30 ALPINE ESTATES DRIVE

City or Town: CRANSTON

State: RI Zip: 02921 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

COMMUNITY SERVICE

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	NITIN TRIVEDI	26 JADE ROAD COVENTRY, RI 02816 USA
SECRETARY	ANAND SALOOJA	859 HOPE STREET PROVIDENCE, RI 02906 USA
PRESIDENT	AMRUT PATEL	30 ALPINE ESTATES DRIVE

		CRANSTON, RI 02921- USA
VICE PRESIDENT	ISHVAR N. PATEL	571 STATE ROAD NORTH DARTMOUTH, MA 02747 USA
DIRECTOR	SRINIVAS VELURY	26 LENOX ROAD CRANSTON, RI 02920 USA
DIRECTOR	BRIJ CHAUDHARY	43 BRIGGS STREET CRANSTON, RI 02920 USA
DIRECTOR	MAHESH L. PATEL	20 SHAMROCK CIRCLE ATTLEBORO, MA 02703 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

AMRUT R. PATEL 30 ALPINE ESTATES DRIVE CRANSTON , RI 02921

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 6 Day of April, 2016 at 5:15:09 PM by the authorized person. 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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.**

By AMRUT R. PATEL  
Signature of Authorized Person

Form No. 631  
Revised 09/07