

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

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2015

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

| 1. Entity ID No. 141370 | 2. Exact name of the limited liability company. Zaheer, LLC | | | | | | | | | | |
|--|--|--|------------------|-----------------------------|--------------------|---------------------|---------------|-------|--|--|--|
| 3. State of Formation Rhode Island | I | Brief description of the character of business conducted in Rhode Island Convenience Store | | | | | | | | | |
| 5. Principal office address 119 EAST MAIN STREET | | | | City West Warwick | State RI | Zip 02 8 | 393 | - | | | |
| Contact Name Zaheer Akbar | | | | Contact Title Member | | | | | | | |
| Street Address 22 Country Meadow Drive | | | City Cranston | State RI | Zip 02 9 | Zip 02921 | | | | | |
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| Manager Name | | | Manager Name | | | | | | | | |
| Street Address | | | Street Address | | | | | | | | |
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| Manager Name | | | | Manager Name | | | PR | RP OR | | | |
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| This information is currently | of record in the | e Office of the Sec | retary of | State. Changes require fill | ng Form 642. | | | 133 | | | |

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| 1000 | LAZIN . | | |

Form No. 632 Revised: 01/2012

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

Date

Zaheer Akbar

Print or Type Name of Authorized Person