



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2016
Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 125461		2. Exact name of the Limited Liability Company OM SHARP, LLC									
3. NAICS Code 53		4. Brief description of the character of business conducted in Rhode Island MOTEL BUSINESS.									
5. State of Formation Rhode Island											
6. Principal Office Address 2392 PUTNAM PIKE.				City GLOCESTER		State RI		Zip 02814			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person											
Contact Name ARVIND PATEL				Contact Title MEMBER							
Street Address 2392 PUTNAM PIKE.				City GLOCESTER		State RI		Zip 02814			
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS											
Manager Name				Manager Name							
Street Address				Street Address							
City		State		Zip		City		State		Zip	
Manager Name				Manager Name							
Street Address				Street Address							
City		State		Zip		City		State		Zip	
Check the box to indicate an attachment <input type="checkbox"/>											
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.											
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.											
Name of Authorized Person ARVIND PATEL								Date 10-6-16			
Signature of Authorized Person <i>armpatel</i>											

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

OCT 17 2016

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