



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

**Annual Report for the year: 2017**  
**Corporation**

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECEIVED  
 R.I. DEPARTMENT OF STATE  
 BUSINESS SERVICES DIVISION  
 2017 FEB -8 PM 3:49

<b>1. Entity ID Number</b> 123782	<b>2. Exact name of the Corporation</b> Shanti Hospitality, Inc.		
<b>3. Principal Office Address</b> 101 New London Avenue		<b>City</b> Cranston	<b>State</b> RI
		<b>Zip</b> 02920	
<b>4. NAICS Code</b> 72 - Accommodation and Food	<b>6. Brief description of the character of business conducted in Rhode Island</b> Hotel Management		
<b>5. State of Incorporation</b> Rhode Island			

<b>7. List ALL officers (names and addresses)</b> <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
<b>President Name</b> Suresh M. Patel			<b>Vice-President Name</b> Rehka Patel		
<b>Street Address</b> 29 Horizon Drive			<b>Street Address</b> 29 Horizon Drive		
<b>City</b> Cranston	<b>State</b> RI	<b>Zip</b> 02921	<b>City</b> Cranston	<b>State</b> RI	<b>Zip</b> 02921
<b>Secretary Name</b> Rehka Patel			<b>Treasurer Name</b> Suresh M. Patel		
<b>Street Address</b> 29 Horizon Drive			<b>Street Address</b> 29 Horizon Drive		
<b>City</b> Cranston	<b>State</b> RI	<b>Zip</b> 02921	<b>City</b> Cranston	<b>State</b> RI	<b>Zip</b> 02921

<b>8. List ALL directors (names and addresses)</b> <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
<b>Director Name</b> Suresh M. Patel			<b>Director Name</b> Rehka Patel		
<b>Street Address</b> 29 Horizon Drive			<b>Street Address</b> 29 Horizon Drive		
<b>City</b> Cranston	<b>State</b> RI	<b>Zip</b> 02921	<b>City</b> Cranston	<b>State</b> RI	<b>Zip</b> 02921
<b>Director Name</b>			<b>Director Name</b>		
<b>Street Address</b>			<b>Street Address</b>		
<b>City</b>	<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>

<b>9. Shares Authorized</b>		<b>10. Shares Issued</b> <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES      CLASS/SERIES      PAR VALUE	
		50	Common      No Par

11. 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.  
**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 Representative**  
Suresh M. Patel

**Date**  
2/8/17

**Signature of Authorized Representative**  
**FILED**

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

**FEB 08 2017**

**BY**