



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

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2018

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(cdd)) is subject to a penalty fee of \$25.00.

1. Corporate ID No 137888		2. Name of Corporation SHREE BAHUCHAR, INC. (7211107)			
3. Street Address Principal Business Office 24 Winnapaug Road			City Westerly	State RI	Zip 02891
4. Business Phone No 401-348-0320		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island to own, operate, manage, lease, buy, sell and otherwise deal with inns, hotels, motels					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Mahendra Patel			Vice President Name Dipika Patel		
Street Address 37 Marks Court			Street Address 37 Marks Court		
City Branford	State CT	Zip 06405	City Branford	State CT	Zip 06405
Secretary Name Mahendra Patel			Treasurer Name Dipika Patel		
Street Address 37 Marks Court			Street Address 37 Marks Court		
City Branford	State CT	Zip 06405	City Branford	State CT	Zip 06405
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Mahendra Patel			Director Name Dipika Patel		
Street Address 37 Marks Court			Street Address 37 Marks Court		
City Branford	State CT	Zip 06405	City Branford	State CT	Zip 06405
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
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 200		Class/Series common	Par Value no par value
		THIS SECTION MUST BE COMPLETED			

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

**FILED** *82*  
FEB 20 2018  
BY *4900*  
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.  
*Mahendra Patel* 2/6/18  
Signature \_\_\_\_\_ Date \_\_\_\_\_  
Print or Type Name **MAHENDRA PATEL**  
Title *Pres*