

1.) CORPORATION NAME: <b>KHUSHI CORPORATION</b>	DUE DATE: <b>2/29/2016</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>SWATI M RAVAL 872 LOS COLONIS DR VIRGINIA BEACH, VA</b>	SCC ID NO: <b>06312185</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>VIRGINIA BEACH CITY</b>	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 872 LOS COLONIS DRIVE

CITY/ST/ZIP: VA BEACH, VA 23456-6415

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: NAYANA P RAVAL TITLE: PRESIDENT ADDRESS: 872 LOS COLONIS DRIVE CITY/ST/ZIP/CO: VA BEACH, VA 23456-6415	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
---	-------------------------------------	---------	-------------------------------------	----------

NAME: PIYUSH R RAVAL TITLE: VICE PRESIDENT ADDRESS: 872 LOS COLONIS DRIVE CITY/ST/ZIP/CO: VA BEACH, VA 23456-6415	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
--	-------------------------------------	---------	-------------------------------------	----------

NAME: MITESH P RAVAL TITLE: TREASURER ADDRESS: 872 LOS COLONIS DRIVE CITY/ST/ZIP/CO: VA BEACH, VA 23456-6415	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
---	-------------------------------------	---------	-------------------------------------	----------

NAME: SWATI M RAVAL TITLE: SECRETARY ADDRESS: 872 LOS COLONIS DRIVE CITY/ST/ZIP/CO: VA BEACH, VA 23456-6415	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
--	-------------------------------------	---------	-------------------------------------	----------

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ NAYANA P RAVAL	NAYANA P RAVAL, PRESIDENT	2/29/2016
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.