

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215506861				
1.) CORPORATION NAME: SAI NIDHI, INC.		DUE DATE: 1/31/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: SRINIVAS CHUNDI 41789 PURPOSE WAY ALDIE, VA		SCC ID NO: F1654930				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LOUDOUN COUNTY		5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: MO		<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: 41789 PURPOSE WAY						
CITY/ST/ZIP: ALDIE, VA 20105						
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: SRINIVAS CHUNDI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
TITLE: PRESIDENT						
ADDRESS: 41789 PURPOSE WAY						
CITY/ST/ZIP/CO: ALDIE, VA 20105						
NAME: PADMA NAGULAPATI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
TITLE: SEC/DIR						
ADDRESS: 41789 PURPOSE WAY						
CITY/ST/ZIP/CO: ALDIE, VA 20105						
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/ SRINIVAS CHUNDI	SRINIVAS CHUNDI, PRESIDENT	2/23/2015				
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.						