



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000120731

2. Name of Corporation Project USA Corp.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 115 PETTACONSETT AVENUE

City or Town: CRANSTON

State: RI Zip: 02920 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROVIDE FOR IMPROVING LANDSCAPING CONDITIONS THROUGH PLANTING OF TREES AND OTHER ITEMS FOR THE REMEMBRANCE OF VICTIMS AND RESIDENTS OF NEW YORK CITY AFFECTED BY THE SEPTEMBER 11, 2001 TRAGEDY.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|----------|--|--|
| DIRECTOR | REBECCA CARUOLO | 115 PETTACONSETT AVENUE CRANSTON, RI 02920 USA |
| DIRECTOR | CAROLYN RAFAELIAN | 115 PETTACONSETT AVENUE |

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| DIRECTOR | RACHEL RAFAELIAN AJAJ | CRANSTON, RI 02920 RI 115 PETTACONSETT AVENUE CRANSTON, RI 02920 USA |
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**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CAROLYN RAFAELIAN-FERLISE 115 PETTACONSETT AVENUE CRANSTON , RI 02920

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 17 Day of August, 2015 at 10:26:41 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By CAROLYN RAFAELIAN
Signature of Authorized Person

Form No. 631
Revised 09/07