



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 Office of the Secretary of State - Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.  
 Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>160701</b>		2. Exact name of the Corporation <b>PUTTING THE NEIGHBOR BACK IN THE HOOD</b>	
3. State of Incorporation <b>RHODE ISLAND</b>		4. Brief description of the character of business conducted in Rhode Island <b>COMMUNITY DEVELOPMENT</b>	
5. Principal office address <b>16 TIFFANY STREET</b>		City <b>PROVIDENCE</b>	State <b>R.I.</b>
		Zip <b>02908</b>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <b>WALEED MUHAMMAD</b>		Vice-President Name <b>OMAR BARRY</b>	
Street Address <b>982 PLAINFIELD ST</b>		Street Address <b>16 TIFFANY STREET</b>	
City <b>JOHNSTON</b>	State <b>R.I.</b>	Zip <b>02919</b>	City <b>PROVIDENCE</b>
			State <b>R.I.</b>
			Zip <b>02908</b>
Secretary Name <b>PRISCILLA WAKIL</b>		Treasurer Name <b>HERBERT A. HASAN</b>	
Street Address <b>114 BELLEVUE AVE</b>		Street Address <b>141 DAK ST A-8</b>	
City <b>PROVIDENCE</b>	State <b>R.I.</b>	Zip <b>02907</b>	City <b>PROVIDENCE</b>
			State <b>R.I.</b>
			Zip <b>02909</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <b>BOZZIE FORTEZ</b>		Director Name <b>HALIMAH MUHAMMAD</b>	
Street Address <b>73 BENEDICT ST</b>		Street Address <b>982 PLAINFIELD ST</b>	
City <b>PROVIDENCE</b>	State <b>R.I.</b>	Zip <b>02907</b>	City <b>JOHNSTON</b>
			State <b>R.I.</b>
			Zip <b>02909</b>
Director Name <b>NA'IMAH SABUR ANSARI</b>		Director Name <b>Waleed Muhammad</b>	
Street Address <b>978 PLAINFIELD ST</b>		Street Address <b>982 Plainfield Street</b>	
City <b>JOHNSTON</b>	State <b>R.I.</b>	Zip <b>02919</b>	City <b>Johnston</b>
			State <b>R.I.</b>
			Zip <b>02919</b>
8. REGISTERED AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.			

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

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

**FILED**

AUG 09 2016

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A.A.

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.

Waleed Muhammad 9-8-16  
 Signature of Officer or Authorized Representative Date

Waleed Muhammad  
 Print or Type Name of Officer or Authorized Representative