



**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  
 Phone: (401) 222 3040 ~ Email: corporations@sos.state.rhodeisland.gov

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 SECRETARY OF STATE  
 CORPORATIONS DIV  
 2018 MAY 21 PM 4:52

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2018**

Filing Period: June 1 - June 30 • This report must be typed or printed on Form 631

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>102773</b>		2. Exact name of the Corporation <b>MUSLIM AMERICAN DAWAH CENTER OF RHODE ISLAND</b>	
3. State of Incorporation <b>R.I.</b>		4. Brief description of the character of business conducted in Rhode Island <b>RELIGIOUS # 813110</b>	
5 Principal office address <b>59 McCALLAN ST</b>		City <b>PROVIDENCE</b>	State <b>R.I.</b>
		Zip <b>02909</b>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <b>Farid Ansari</b>		Vice-President Name <b>OMAR BARRY</b>	
Street Address <b>59 McCallan ST USA</b>		Street Address <b>16 TIFFANY ST USA</b>	
City <b>PROVIDENCE</b>	State <b>R.I.</b>	City <b>PROVIDENCE</b>	State <b>R.I.</b>
Zip <b>02909</b>		Zip <b>02908</b>	
Secretary Name <b>WALEED MUHAMMED</b>		Treasurer Name <b>Herbert A. Hasan</b>	
Street Address <b>982 PLAINFIELD ST USA</b>		Street Address <b>141 OAK ST A-8 USA</b>	
City <b>JOHNSTON</b>	State <b>R.I.</b>	City <b>PROVIDENCE</b>	State <b>R.I.</b>
Zip <b>02919</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>Miscilla Abdul WAKIL</b>		Director Name <b>Halimah Muhammad</b>	
Street Address <b>114 BELLEVUE AVE USA</b>		Street Address <b>982 Plainfield St USA</b>	
City <b>PROVIDENCE</b>	State <b>R.I.</b>	City <b>Johnston</b>	State <b>R.I.</b>
Zip <b>02907</b>		Zip <b>02919</b>	
Director Name <b>BOSYIE FORTEZ</b>		Director Name	
Street Address <b>696 POTTERS AVE USA</b>		Street Address	
City <b>PROVIDENCE</b>	State <b>R.I.</b>	City	State
Zip <b>02909</b>		Zip	
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

**FILED**

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

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

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

FOR SECRETARY OF STATE USE ONLY

**MAY 21 2018**

**330995**

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.

**Farid Ansari** 5-21-18  
 Signature of Officer or Authorized Representative Date

**Farid Ansari**  
 Print or Type Name of Officer or Authorized Representative