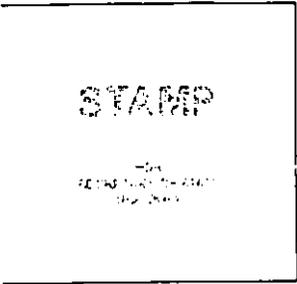




State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

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CORPORATIONS DIV  
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Annual Report for the year:  
Non-Profit Corporation

2009

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>92683</b>		2. Exact name of the Corporation <b>ZUMBATUL JANNAT</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Conducted five daily prayers which is based on Islamic prayers, Perform Friday Prayers (Jumah) every Friday, Friday dinner on last Friday of each month, Arabic &amp; Islamic classes on Saturday, Islamic Teachings.</b>			
4. NAICS Code <b>813110</b>					
6. Principal Office Address <b>801 Elmwood Avenue</b>			City <b>Providence</b>	State <b>RJ</b>	Zip <b>02907</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>PERVEZ KHATIB MD</b>			Vice-President Name		
Street Address <b>45 Lanthier way</b>			Street Address		
City <b>Attleboro</b>	State <b>MA</b>	Zip <b>02703</b>	City <b>A</b>	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Khadijah Lewis-Khan</b>			Director Name <b>Shahmi Oduneye</b>		
Street Address <b>23 William Drive</b>			Street Address <b>130 Ocean Street</b>		
City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>Providence</b>	State <b>RJ</b>	Zip <b>02905</b>
Director Name <b>Pervez Khatib</b>			Director Name		
Street Address <b>45 Lanthier</b>			Street Address		
City <b>Attleboro</b>	State <b>MA</b>	Zip <b>02703</b>	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Shahmi Oduneye</b>					Date <b>6-13-19</b>
Signature of Officer/Authorized Representative 					

SIGN DOCUMENT HERE

**FILED**

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

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