

Agent Name **FARID ANSARI**

68 ANTHONY AVENUE

STATE OF RIODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

Matthew	r A. Brown, Secretary o	of State			401.222,30
NON-PROFIT Filling Period: June 1 (FORM MENT HE TYPED OR	June 30 🔹 Filling 1	ON ANNUAL Free: \$20.00	REPORT FOR THE	YEAR	2005
Corporate ID No.	2. Name of Corporation Muslim American Dawa				
State of Incorporation RHODE ISLAND	-1 $(c/)^{2}$ \mathcal{M}	Rhode Island - Street Addi	esc.	Providence	02969
5 Foreign corporation. Ente	r pencipal office address	7 //	City	State	Z(p
RELIGIOUS	esses of the affairs which are a	·	CHMENT) FILL IN SPACES Vice President Name	BEFORE USING ATTAC	CHMENTS
Faria Surve Addition of 11	Ansau_		Street Address	Muhammad	·
bf linth	ony AVE		54 notherla	Le au.	<u> </u>
Providence	State CI.	21102909	Craston	State	02905
Namo L	Guari		HERBELT A	HASAN	
Street Address	hone are	Z,	SINVE AUGUSS BELLEVUE	AVE	
Prov.	Stard)	OLGO T	CHY PROVIDENCE TACHMENT) FILL IN SPACES	State P.I.	02907
THE NUMBER OF DIR	ECTORS OF A DOMEST	TIC (RHODE ISLAND) CORPORATION SHALL NO		
Director Name PRISC	illa Abdul	-WAKIZ	Director Name OMAR	BARKY	- <u></u>
Street Address 114 B	Pellerue A	ve. Apt. 1	Street Address 16 TIFFA	NY STREET	
PROV.	State R I	02907	PROVIDENCE	State I	02908
Director Name Halin	ah Muhan	mid	Director Name . Richard	Barros	
Since Address Next	rerlands A	we	Sirver Address 63 A660	# S.T.	
Crunston	State	02905	CH Providence	State R-I.	02806
a Deciercorp Acces	T IN DUILING TELAND	DO NOT ALTER . Ch	anges require filling of Form	. 641 - R.I.G.I., 7-6-13 /	7-6-78

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

City

PROVIDENCE

Address

	Un
102773	rep
File Date	sta
Check No	Sig
By:	Pn
FOR SECRETARY OF STATE USE ONLY	771

Inder penalty of perjury, I declare and port, including any accompanying sche	dules and statements, and that all
interments contained herein are true and	correct. 6/n-/05
Farid Ausari	Date
rint or Type Name of Officer Than reside	nt
itle of Officer	Form 631 Rev. 04/04

Ζψ

02909-

Attachment Re Solditional Officers 9.) Directorgyvame:

Richard Wateen Barros

Providence, of 02905 (or 07) Persis V. Stanton, 147 Warrington H. Frovidence, BI 02907



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

401,222,3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004 Filing Period: June 1 - June 30 • Filing Fee: \$20.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) L Corporate ID No 2 Name of Corporation 102773 Muslim American Dawah Center 3 State of Incorporation 4. Corporate address in Rhode Island - Street Address OROV RHODE ISLAND 5 Foreign corporation, Enter principal office address 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island **RELIGIOUS** 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) 🔲 FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name HERBCR J.ESS_THAN_TJJREE (3). R.J.G.L. 7-6-23 DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION City 02907 02906 - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78 9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Address Avent Name **FARID ANSARI** Address City 247 LOCKWOOD AVENUE, #4 **PROVIDENCE** 02907 This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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 hereig are togezand correct. 2016610 Date FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040



2003 N-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

iling Period: June 1 - Ju	ine 30 • Filing Fed	e: \$20.00	CDI ONI I ON III		,
FORM MUST BE TYPED OR PI	RINTED IN BLACK)				
1. Corporate ID No.	2. Name of Corporation	•			
102773 3 State of Incorporation	Muslim American Dawa	ih Center <i>Rhode Island - Street Addre</i>		Town	
RHODE ISLAND	1947 7	CKWOOD.	a . a	I I PASI	11dence 02901
5. Foreign corporation. Enter pri	LA 1. (/~)	CKOOOO	City	State	Zip
	N/A				
5. Brief Description of the charact RELIGIOUS	er of the offairs which are	actually conducted in Rhod	le Island.	<u></u>	
7. NAMES AND ADDRESSES	OF THE OFFICERS	("X" HOX FOR ATTACH	IMENT) FILL IN SPACES B	EFORE USIN	IG ATTACHMENTS
President Name [1] A. Her	bert A. H	Gsan	Vice President Name No Walleto	1_H, N.	wammad
Street Address	11.		Street Address	rland	i
CIN 114 De	Herue ave	7/10	City- 77 / 1701/16	State	(\lambda \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	llerue ave	<u> </u>		State	
	Name An	Sari	 		i, Hasan
Sirver Address Art	10011-are			evue	ave
Chy Providence	State y	0209	CIET FUVILANCY	Sing 7	201907
			HMENT) TELL IN THE SPA		
	TORS OF A DOMEST	(HHODE ISLAND)	CORPORATION SHALL NOT	SE LESS IN	13 1771 (3). H.I.d.E. 7-0-20
Director Name	Mis Abdu	<u>ul-Wakil</u>	Director Name	1 Priv	1005
Sircei Address 114 BC	Mevue a	VP	Sircei Address 63 Abor	7 5tr	96.1
- Providence	State I	1000	Providence	State 1/2	25.06
Director Name	Videcin_		Director Name NORC		
Street Address 306 Co	$\sim 10^{-1}$	avc	Sireei Address		
E Providence	Stale	2505	City	State	Zip
	RHODE ISLAND - DO	NOT ALTER - Chang	es require filing of Form 641	R.I.G.L. 7-6-	13 / 7-6-78
Agent Name			Address		
FARID ANSARI					Tar.
Address			City		Zip
247 LOCKWOOD AVENUE,			PROVIDENCE		02907
This report must be signed	in ink by either the	President, Vice Pres	ident, Secretary, Assistant S	ecretary, Tro	asurer, Receiver or Trustee,
			Under penalty of perjury.	declare and aff	irm that I have examined
* 1'-	n ~ _7 7	3 * 1	this report, including any a and that all statements cont	ecompanying s	chedules and statements.
File Date	ED—		Healient C	1. Has	ian:
Check No AUG 2	7 2003		Signature of Appear	A 41	ASAN.
By 3	45 cm-	' '] =	Print ir vac Name of Office	- Llacou	(TRIFASUATE)
FOR SECRETARY OF STATE	USE ONLY .	_	Title of Officer)	orm by Kev. 6/

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401,222,3040

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: June 1 - June 30 Filing Fee: \$20.00

Filing Period: June 1 - June FORM MUST BE TYPED OR PRI		ee: \$20.00			, a., , a. , a., aaraaa, ara aa
The same of the sa		AMERICAN	I DAWAH CENTE	Z	720
3. State of Incorporation R HODE ISCAND	a. Corporate pauress i	n Rhode Island -Street Add KNOOD STRE	ET	PROVIDENCE	02907
5. Foreign corporation: Enter prim	cipal office address	_	PROVIDENCE	RHOVE KLANS	02907
6. Brief Description of the characte	of the affairs which o	are actually conducted in h	and the second of the second o		
PROMOTING MU	SOFTHE OFFIC	ERS ("A" BOX FOR AT	thode Island FRFAITH DITTO 45, (W TACHMENT) [] FILLIN STACES	BÉFORE USINGATTACI	(MENTS
President Name HERBERT	A HACH	K1	Vice President Name WACEES MUH	AMNIAD	
Sircei Address 114 BELLVI			54 NETHENLAND		
CITY PROVIDENCE	Siale R.I.	Zip 02987	CLANSTON		02910
Secretary Nume			Treasurer Name HERBERT H	ASAN	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Suret Address			Street Address 114 BELLYUE	AVENUE	agourous or the title
Ciry	State	Zip	CIN PROVIDENCE	Sime R.I	Zip 02907
8. NAMES AND ADDRESSE	S OF THE DIREC	TORS ("A" BOX FOR	4TTACHMENT) □ FILL IN SPAC IO) CORPORATION <u>SHALL NOT E</u>	ES BEFORE USING ATTA BE LESS THAN THREE (3	CHMENTS).R.I.G.L 7-8-23
Director Name MAHDI NA 86	er - gjeggerektit et i ver skommittekt.		Director Name CULTIS W		a entra entra entra en estra en estador
Simel Address 306 CAUFORU		1E	Sireei Address 114 BELL VUE	ANENUE	
PROVIDENCE	State	7.ip 02805	PROVIDENCE	Size RI	02907
Director Name OMAR BAR	RY	, , , , , , , , , , , , , , , , , , , ,	Director Name NONE		
Sircei Address	TE AVENT		Street Address	.,,	
Street Address 20 RAD CLIFT City PROVIDENCE	State T	Zip 02908	.City	State	Zip
9 REGISTERED AGENT I	RHODE ISLANI	DO NOT ALTER- Chi	inges require filing of Fo	rm 641 -R.I.G.L.7-6-13/	1-4-78
Agent Name NoN	, E	_	Address		
Address			Ciry	Zip	***************************************
a participation of the second		,			
This report must be signed	l in ink by either	the President, Vice I	President, Secretary, Assistan	i secretary, Treasurer,	Mederact of Italic
			Linder penalty of penius	; I declare and affirm that	I have examined
			this report, including any	accompanying schedules	and statements,
File Date 10-16-	112		and that all schements ed	han 10-	15:-02
File Date 10 10			Signature of Officer	A 11 Dore	<u> </u>
Check No. 1083		· }	LERBERT Print or Type Name of Office	H. HASAN	
By: AMF			PRESIDENT	•	
FOR SECRETARY OF STATE	USE ONLY		Title of Officer		Form 631 Rev. 6/

Filing Fee: \$20.00

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

NON-PROFIT CORPORATION

Со	rporate ID Number 102773	Annual Report for the year 2001
1.	The name of the corporation is	IM AMERICAN DAWAH CENTER
2. 3.	The address of the registered office of the o	corporation in this state is 247 Lockwood STREET
	PROVIDENCE, RHODE I	
4	name of its registered agent in this state at	
4.		ally conducting in Rhode Island, briefly stated, is <u>Spiritual Teaching</u>
5	•	rincipal office in the state or other jurisdiction under the laws of which it is
6.	Corporate address in Rhode Island 24;	2 Lockwood St. Providence, KI 02907
7.	number of directors of a domestic (Rhode is	ADDRESS ADDRESS
¥	Director Director	147 Wappen of AR DAVA TOS
3	wealland, Wakel Director	114 Bellave Ave Got. / Prov. KI 02907
Ť	President	68 anthony the PIN, RI 02909
2	Lad a Muhamal Vice-President	54 Netherlands Ave. Cranston RI
N	dina Masari Secretary	68 anthony Ave Prov. RI. 02909
H	REET A. HASAN Treasurer	P.O.BOX 5689 PLOV, R.J., 02903
Da	ted: <u>6-28-02</u>	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,
	7-9-02	Mushim American Jawah Center Exact Name of Corporation
	1156	By Jarid Unsari
	AMF	Title President
	/ 0 1 1	(Report must be signed by an officer)



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

NON-PROFIT CORPORATION

Cor	rporate ID Number 102773 Annual Report for the year 2000
1	The name of the corporation is Muslim American Dawah Center
2.	The state or other jurisdiction under the laws of which it is incorporated is Rhode Island
3.	The address of the registered office of the corporation in this state is and the
	name of its registered agent in this state at that address is Herbert Hasan
4.	The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is
5	If a foreign corporation, the address of its principal office in the state or other jurisdiction under the laws of which it is incorporated is N/A
6.	Corporate address in Rhode Island
7.	Names and addresses of its directors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the
	number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)
1	NAME OFFICE ADDRESS
E	arid Ansari Director/Advisor 68 Anthony are from RI
\mathcal{L}	urtis Wakil Director/Amin Socurity 223 Wadsworthst (Tox RI
M	and Nadeem Director 366 California ave for RT
H	erbert Hasan President 22-J Kolling Green Fall River, MASS
ТK	ichard Matron Vice-President 9 Slocum ST HOV RI
$\frac{Nc}{L}$	ileed Mykimmadsecretary 54 Natherlands are crosson R-
70	erbert Hasan Treasurer 22-5 Rolling Green Fall River, MIRBS
Dat	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.
	Muslim American Dawah Conter Exact Name of Corporation
	1/1/ 30 2000 By Dir Cutin Wakil
	Title
	(Report must be signed by an officer)



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

	NON-PROFIT CORPORATION 1999
C	orporate ID Number 10773 Annual Report for the year 1000
1.	Mucha Angercan Dayon Contor
2.	The state or other jurisdiction under the laws of which it is incorporated is River Island
3.	The address of the registered office of the corporation in this state is
	name of its registered agent in this state at that address is <u>Herbert H9S9N</u>
4.	The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is
5	If a foreign corporation, the address of its principal office in the state or other jurisdiction under the laws of which it is incorporated is N/A
6.	Corporate address in Rhode Island N/A
7.	Names and addresses of its directors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)
	NAME OFFICE ADDRESS
am	Farid Ansaci Advisor 68 Anthony are Prov. RI
	Justis Walsi I Breeter Digital 223 Wadsworth Prov RI
\overline{N}	landi Nadeem Director 306 California ave Prov RI
	erbert Hasan President 22-J Rolling Green Fall River, MASS
[<	kichard Barros Vice-President 9 Slocum St. Prov. RI
L	Valped Muhammad secretary 54 Netherlands are Cronston KI Herbert Hasan Treasurer 22-I Rolling Green Fall River, Mass
Da	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.
	Exact Name of Corporation
	By Pin Cuting Wahi
	(Report must be signed by an officer)