

**State of Rhode Island  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040**Foreign Non-Profit  
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:** 2021**1. Corporate ID No.** 000717430**2. Name of Corporation** DebtWave Credit Counseling, Inc.**3. State of Incorporation**State: CA**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

541990**4. Principal Office Address**No. and Street: 9325 SKY PARK CT.STE 260City or Town: SAN DIEGOState: CAZip: 92123Country: USA**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**FINANCIAL LITERACY EDUCATION PROGRAMS AND DEBT MANAGEMENT SERVICES**6. Names and Addresses of the Officers and Directors:****All officers and directors must be listed.**

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT      | ANTONY MURIGU                                         | 9325 SKY PARK CT.<br>SAN DIEGO, CA 92123 USA                      |
| PRESIDENT      | ANTONY MURIGU                                         | 9325 SKY PARK CT. STE. 260<br>SAN DIEGO, CA 92123 USA             |
| TREASURER      | MICHAEL BUTSKO                                        | 28459 OLD TOWN FRONT ST., STE 315<br>TEMECULA, CA 92590 USA       |
| SECRETARY      | DOUGLAS TOKARIK                                       | 4719 VIEWRIDGE AVE. STE. 200<br>SAN DIEGO, CA 92123 USA           |
| OFFICER        | MICHAEL MARSDEN                                       | 9325 SKY PARK CT. STE. 260<br>SAN DIEGO, CA 92123 USA             |
| BOARD MEMBER   | JOHN CASARIETTI                                       | 21206 COUNTRY FARM LANE<br>TRABUCO CANYON, CA 92679 USA           |
| VICE PRESIDENT | MICHAEL BUTSKO                                        | 28459 OLD TOWN FRONT ST., STE 315<br>TEMECULA, CA 92590 USA       |
| OTHER OFFICER  | MICHAEL MARSDEN                                       |                                                                   |
| BOARD MEMBER   | JAMES MARSH                                           | 10035 KIKA COURT<br>SAN DIEGO, CA 92129 USA                       |
| BOARD MEMBER   | BRIANNA LEISSOO                                       | 1107 TERRACINA LANE<br>SAN DIEGO, CA 92103 USA                    |

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI  
02888

**8. 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 June, 2021 at 3:15:26 PM 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 ANTONY MURIGU  
Signature of Authorized Person

Form No. 631  
Revised 09/07