



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

**Non-Profit Corporation  
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.** 001712489

**2. Name of Corporation** The Council of Muballighuns International: Faith and Cultural Wellness Center

**3. State of Incorporation**

State: RI

**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

**4. Principal Office Address**

No. and Street: 194 LYNCH ST  
City or Town: PROVIDENCE State: RI Zip: 09208 Country: USA

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

FOR THE ORGANIZATION, MAINTENANCE, AND PREPUTIAL TEACHINGS OF THE ISLAMIC (COMPREHENSIVE WAY OF LIFE) AND (CHOSEN SPIRITUAL, FAITH AND CULTURAL PRACTICES AND RELIGION), BY ALLAH (THE ONE TRUE CREATOR). HIS APOSTLE THE PROPHET AND LAST MESSENGER MUHAMMAD IBN ABDALLAH (PEACE, BLESSINGS AND MERCY OF GOD BE UPON HIM AND HIS FAMILY THE AHLUL BAYT). THE TWELVE HOLY APOSTOLIC IMAMS (PEACE, BLESSINGS AND MERCY FROM ALLAH BE UPON THEM). AND TO FURTHER THEIR GODLY CAUSE FOR JUSTICE WHICH THEY REPRESENTED (THE ISLAMIC ORIGINAL COVENANT).

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island**

**Corporation shall not be less than 3.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
INCORPORATOR	MUBALLIGH, MUSTAFA MOHAMMED	194 LYNCH STREET PROVIDENCE, RI 02908 USA
DIRECTOR	SUNNI R. RUMSEY-AMATULLAH PHD	30 HART STREET, APT#1 COHOES, NY 12407 USA
DIRECTOR	MUBALLIGH, MUHAMMAD A AL- RAHMAN PSYD, LMFT	455 SCHUTT ROAD EXTENSION, #302 MIDDLETOWN, NY 10940 USA
DIRECTOR	MUBALLIGH, MUHAMMAD SAEED- PHIPPS MHS, LMFT	2035 FORD GATES DRIVE GARNER, NC 27529 USA
DIRECTOR	MUBALLIGH, JAFFAR ABDUL- MUBDI	1360 NEW YORK AVENUE BROOKLYN, NY 11210 USA
DIRECTOR	JR. MUBALLIGH TARIK MAHIDI B.A.	950 SOUTH FLOWER STREET, #204 LOS ANGELES, CA 90015 USA
DIRECTOR	MUBALLIGH, MUSTAFA MOHAMMED M.S.	194 LYNCH STREET PROVIDENCE, RI 02908 USA
DIRECTOR	JR. MUBALLIGH I AL-RAHMAN M.A.	87 COACH LANE NEWBURGH, NY 12550 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**

MUBALLIGH MUSTAFA MOHAMMED 194 LYNCH STREET PROVIDENCE , RI 02908

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

**Signed this 28 Day of August, 2021 at 7:10:01 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 MUSTAFA MOHAMMED  
Signature of Authorized Person

Form No. 631  
Revised 09/07