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. 001711975

2. Name of Corporation The Momista Inc

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

813319

4. Principal Office Address

No. and Street: 20 DEAN AVE
#2
City or Town: JOHNSTON State: RI Zip: 02919 Country: USA

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

THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES AS SPECIFIED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, INCLUDING FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. THE SPECIFIC PURPOSES OF THE CORPORATION IS TO CONNECT PARENTS TO RESOURCES TO HELP THEM MEET FINANCIAL, EDUCATIONAL, COST OF LIVING, AND MENTAL HEALTH NEEDS; TO ASSIST FAMILIES WITH EARLY CHILDHOOD DEVELOPMENT AND CREATIVE LEARNING. THE CORPORATION SHALL NOT BE CONDUCTED OR OPERATED FOR PROFIT AND NO PART OF THE NET EARNINGS OF THE CORPORATION

SHALL INURE TO THE BENEFIT OF ANY INDIVIDUAL, NOR SHALL ANY OF THE PROFITS OR ASSETS OF THE CORPORATION BE USED OTHER THAN FOR THE PURPOSES OF THE CORPORATION.

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.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
SECRETARY	RAYLA MICHELLE JOHNSON-DAYE	10 DEMETRA TERRACE DEDHAM, MA 02026 USA
PRESIDENT/FOUNDER	CASHAWNA BONITA SHAKIR	2050 SMITH STREET UNIT 113928 NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	RAYLA MICHELLE JOHNSON-DAYE	10 DEMETRA TERRACE DEDHAM, MA 02026 USA
DIRECTOR	AMIR QUADEER SHAKIR	2050 SMITH STREET UNIT 113928 NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	CASHAWNA BONITA SHAKIR	2050 SMITH STREET UNIT 113928 NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	AYAH SHAKIR	2050 SMITH STREET UNIT 113928 NORTH PROVIDENCE, RI 02911 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

CASHAWNA BONITA SHAKIR 2050 SMITH STREET UNIT 113928 NORTH PROVIDENCE , RI 02911

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

Signed this 6 Day of October, 2021 at 10:00:29 AM 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 CASHAWNA SHAKIR
Signature of Authorized Person

Form No. 631
Revised 09/07