



**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. 001701131

2. Name of Corporation A-Wear-Ness, 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: 940 QUAKER LANE

APT. 921

City or Town: EAST GREENWICH

State: RI

Zip: 02818

Country: US

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

TO RAISE AWARENESS OF HUMANITARIAN CRISIS NATURAL DISASTERS

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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
DIRECTOR	WAYMAN J. PEARSON III	605 E CHELSEA STREET TAMPA, FL 33603 USA

DIRECTOR	SEAV MEY Y	940 QUAKER LANE APT:812 EAST GREENWICH, RI 02818 US
DIRECTOR	MITCHELL TIAH	940 QUAKER LANE APT:812 EAST GREENWICH, RI 02818 US

**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**

MITCHELL TIAH 940 QUAKER LANE. APT. 812 EAST GREENWICH , RI 02818

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

Signed this 24 Day of November, 2021 at 10:04:23 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 MITCHELL TIAH
Signature of Authorized Person

Form No. 631
Revised 09/07

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