



**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: February 1 - May 1

*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:** 2022

**1. Corporate ID No.** 001678081

**2. Name of Corporation** SHILOH TABERNACLE

**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: 1168 CHALKSTONE AVENUE  
UNIT 2

City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

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

BIBLE STUDY AND PRAYER MEETINGS ALONG WITH RELIGIOUS CONDUCTS AND SERVICES.

**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
PRESIDENT	ATTA OBUOM AMEYAW WIAFE	1168 CHALKSTONE AVE UNIT 2

		PROVIDENCE, RI 02908 USA
SECRETARY	TANIA D ABETE	1168 CHALKSTONE AVE UNIT 2 PROVIDENCE, RI 02908 USA
DIRECTOR	ATTA O AMEYAW WIAFE	1168 CHALKSTONE AVE UNIT 2 PROVIDENCE, RI 02908 USA
DIRECTOR	MARIAMA SOKARI	26 CATALPA CIRCLE WORCESTER, MA 01603 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**

ATTA AMEYAW WIAFE 1168 CHALKSTONE AVENUE, UNIT 2 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 13 Day of February, 2022 at 11:23:18 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 ATTA AMEYAW WIAFE  
Signature of Authorized Person

Form No. 631  
Revised 09/07