Date: 4/28/2022 9:13:00 AM RI SOS Filing Number: 202216137550



State of Rhode Island

## **Department of State - Business Services Division**

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R.I. DEPT. OF STATE

BUS SVCS DIV

2011 APR 28 A 9 10

Annual Report for the year:

**Non-Profit Corporation** 

- → Filing period: February 1 May 1
- → Filing Fee: \$20.00
- → Penalty: Additional \$25.00 fee if form is not filed by May 31.

|  |  | -  |                                   |
|--|--|--|-----------------------------------|
| 1 Entity ID Number 2 Exact name of the Corporation 201685996 MGRAKD-   | ANAMIRDA R   | HODE 19  | S LA-NIN                          |
|  |  | • • •  | -7679                             |
| State of Incorporation  5 Brief description of the character of business conducted in Rhode Island  Charty Organization. Social chib   |  |  |                                   |
| Charly Cha   | an Latin.  | 200  | 10/1                              |
| 4. NAICS Code  |  | Ca   | Chu5                              |
| 81340  |  |  | _                                 |
| 6. Principal Office Address  | City.  | State  | Zip                               |
| 5LORIELLEN DE.   | LINCOLN  | R1   | 02865                             |
| 7. List ALL officers (names and addresses)  Check the box to indicate an attachment  |  |  |                                   |
| President Name NNAMDI AMA ECHINA   | Vice-President Name  |  |                                   |
| Street Address  LORT ELLEN DR  | Street Address   |  |                                   |
| City LINCOLN State RT Zip 0286   | City   | State  | Zip                               |
| Secretary Name CHUKA OKOYE   | Treasurer Name  (D) C V Aq1  | wuegb u  | بق                                |
| Street Address 309 HUXLEY AVE  | Street Address MAY   | ad/ST  |                                   |
| City ROLLDFX CE State RI ZIP 02905   | CITY Provided OurCo  | State  | ZIP () 7909                       |
|  | 110000000000000000000000000000000000000  | _  |                                   |
| 8. List ALL directors (names and addresses). RI Corporations MUST lis  |  | neck the box to indicate   | e an attachment                   |
|  |  | eck the box to indicate  | e an attachment                   |
| 8. List ALL directors (names and addresses). RI Corporations MUST III  Director Name  AMATHIA  Street Address  Street Address  Street Address  Street Address  Street Address  Street Address  | Director Name Street Address, J.   | bloove   | e an attachment                   |
| 8. List ALL directors (names and addresses). RI Corporations MUST III  Director Name  AMATHIA  Street Address  Street Address  Street Address  Street Address  Street Address  Street Address  | Ch<br>Director Name  | D W V State  | Zip Aof                           |
| 8. List ALL directors (names and addresses). RI Corporations MUST III  Director Name  AMATHEM  Street Address  Sheriffen   | Director Name Street Address, J.   | phoyE  |                                   |
| 8. List ALL directors (names and addresses). RI Corporations MUST In AMAD AWAFCHINA  Director Name  City Lincoln  Director Name  City Agwurgsin  Street Address  Street Address  The Address  Street Address  The Add | Director Name  Street Address, July City DVD Mdence  | phoyE  | Zip AJS                           |
| 8. List ALL directors (names and addresses). RI Corporations MUST In AMAD AWAFCHINA  Director Name  City Lincoln  Director Name  City Agwurgsin  Street Address  Street Address  The Address  Street Address  The Add | Street Address. HULA  City  Director Name  Director Name  Director Name  | phoyE  | Zip AJS                           |
| 8. List ALL directors (names and addresses). RI Corporations MUST Its  ANATO AMECHINA  Director Name  City Lincoln  State Rich  Street Address  Street Address  City D  Street Address  State Address  Street Address  State Address  Street Address  State Address  Street Address  State Address  State Address  City D  State Address   | Director Name  Street Address  City  Director Name  Director Name  Street Address  City  C | DKOVE<br>State<br>ORONS<br>NE<br>State R/  |                                   |
| 8. List ALL directors (names and addresses). RI Corporations MUST Institute of the Address of th | Street Address  City  Director Name  Director Name  Street Address  Street Add | State P   State  | 21p ADS<br>AVE<br>21p 02920       |
| 8. List ALL directors (names and addresses). RI Corporations MUST Is  AND AND AND ECHINA  Director Name  City Lincoln  Director Name  City Lincoln  State Ri  City Poince State Ri  State Ri  City Poince Registered Agent information of record with the RI Department  Under penalty of perjury, I declare and affirm that I have examined   | Street Address City Director Name  Director Name Street Address St | State P   State P   State P   Form 641.  The panying schedule  | Zip ADF  AVF  Zip O 29 20  es and |
| 8. List ALL directors (names and addresses). RI Corporations MUST In AMARCH/NA  Director Name  City State Zip 0286  Director Name  Street Address  City State Zip 0286  City State Zip 0409  9. The Registered Agent information of record with the RI Department of the statements, and that all statements contained herein are true and   | Street Address City Director Name  Director Name Street Address St | State P   State P   State P   Form 641.  The panying schedule  | Zip ADF  AYF  Zip O 29 20  es and |
| 8. List ALL directors (names and addresses). RI Corporations MUST Is  AND AND AND ECHINA  Director Name  City Licola State Zip 02865  Street Address  City Paricle State Zip 02909  9. The Registered Agent information of record with the RI Department of the Richard Statements, and that all statements contained herein are true and This report must be signed by either the President, Vice-President, Secretary Assistant Se Name of Officer/Authorized Representative  ANAM AMALIANT AMAE CHINA  City Paricle State Zip 02909  9. The Registered Agent information of record with the RI Department of the President of the Presi | Street Address City Director Name  Director Name Street Address St | State  | Zip ADF  AVF  Zip O 29 20  es and |
| 8. List ALL directors (names and addresses). RI Corporations MUST Is  AND AND AND ECHINA  Director Name  City Lincoln  State Ripoln  Street Address  City Poince State Ripoln  State Ripoln  State Ripoln  City Poince Registered Agent information of record with the RI Department of the Ripoln Report must be signed by either the President, Vice-President, Secretary Assistant Secretary As | Street Address, July City DV Maleuce Director Name Street Address  | State  | Zip ADF  AVF  Zip O 29 20  es and |
| 8. List ALL directors (names and addresses). RI Corporations MUST Is  AND AND AND ECHINA  Director Name  City Lincoln  State Riport State  City Pour Cleude  9. The Registered Agent information of record with the RI Department of the Riport must be signed by either the President, Vice-President, Secretary Assistant Se Name of Officer/Authorized Representative  MARN J. AND J. AND ECHINA  AND AND J. A | Street Address City Director Name  Director Name Street Address St | State CONS State CONS State Constitution of the Constitution of th | Zip ADF  AYF  Zip O 29 20  es and |

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

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