



**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 - ENTER THE CURRENT FILING YEAR 2023: 2023

1. Corporate ID No. 001672673

2. Name of Corporation Dream it, Believe it, Achive it Ayzrielle Prom Dresses

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
624110

4. Principal Office Address

No. and Street: 33 BOUNDARY AVE

City or Town: JOHNSTON

State: RI

Zip: 02919

Country: USA

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

TO MAKE A DREAM COME TRUE TO THOSE UNFORTUNATE GIRLS THAT CAN AFFORD TO BUY THEIR PROM DRESSES. THEY WILL BE PROVIDED TO VARIOUS ORGANIZATIONS THAT WORK WITH YOUNG WOMEN. THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL AND SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER 501(C)(3).

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
OTHER OFFICER	SILKA DISLA FABIAN	33 BOUNDARY AVE JOHNSTON, RI 02919 USA
DIRECTOR	SILKA Y DISLA FABIAN	10 BYRON ST CRANSTON, RI 02920 USA
DIRECTOR	ELVIS FABIAN	10 BYRON ST CRANSTON, RI 02020 USA
DIRECTOR	CINTHIA SMITH	10 BYRON ST CRANSTON, RI 02920 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**

SILKA Y. DISLA FABIAN 10 BYRON STREET CRANSTON , RI 02920

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

Signed this 21 Day of May, 2023 at 11:47:05 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 SILKA DISLA FABIAN
Signature of Authorized Person

Form No. 631
Revised 09/07

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