



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. 001703314

2. Name of Corporation Salette Malayali Community

3. State of Incorporation

State: RI

NAICS CODE

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

813110

4. Principal Office Address

No. and Street: 36 FOREST AVE

City or Town: RIVERSIDE State: RI Zip: 02915 Country: USA

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

TO MEET AS A COMMUNITY AND DO PRAYER MEETINGS, MASSES AND OTHER CULTURAL ACTIVITIES.

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
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
DIRECTOR	JOYMON SEBASTIAN	10 JANE WHITE CT EAST FREETOWN, MA 02717 USA
DIRECTOR	JERRY JEROME	65 E WASHINGTON ST, APT 8109 NORTH ATTLEBORO, MA 02760 USA
DIRECTOR	SALMA SHAN	29 CUSHMAN AVE EAST PROVIDENCE , RI 02914 USA
DIRECTOR	GINO GEORGE	115 WEST RIVER ST SEEKONK, MA 02771 USA
INCORPORATOR	BESTIN JOSEPH VAYALUNKAL	36 FOREST AVE RIVERSIDE , RI 02915 USA
INCORPORATOR	LIJO SAM THOMAS	73 QUAKER DR WEST WARWICK, RI 02893 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

BESTIN JOSEPH VAYALUNKAL 36 FOREST AVE RIVERSIDE , RI 02915

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

Signed this 30 Day of June, 2023 at 1:56:58 PM 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 LIJO THOMAS
Signature of Authorized Person

Form No. 631
Revised 09/07

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