



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Corporation

2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
JAN 25 2024
SECRETARY OF STATE
USE ONLY

1. Entry ID Number 000488116		2. Exact name of the Corporation BISMILLAH Enterprises, Inc	
3. Principal Office Address 460 Pontiac Ave		City Cranston	State R-I
Zip 02910			
4. NAICS Code 445120	5. State of Incorporation R-I		
6. Brief description of the character of business conducted in Rhode Island CONVENIENCE STORE			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Khalid Javed		Vice-President Name	
Street Address 51 - Gorton Holden Ter		Street Address	
City Weymouth	State R-I	Zip 02886	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
Changes require an additional filing.		NUMBER OF SHARES 1,000	
		CLASS/SERIES CMT	
		PAR VALUE 0.00	
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
Name of Authorized Representative Khalid Javed - KHALID-JAVED		Date 01-25-2024	
Signature of Authorized Representative Khalid Javed		FILED	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

JAN 25 2024

BY QANCA

FORM 630- Revised 12/2023