



**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 YEAR 2024: 2024

1. Corporate ID No. 000071572

2. Name of Corporation OASIS INTERNATIONAL

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

813319

4. Principal Office Address

No. and Street: 600 BROAD ST.

P.O.BOX 27774

City or Town: PROVIDENCE

State: RI

Zip: 02907

Country: USA

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

OUR MISSION IS TO PROMOTE CULTURAL, HEALTH WELLNESS AND TO FACILITATE COMMUNITY ECONOMIC EMPOWERMENT WITH EMPHASIS ON YOUTH LEADERSHIP DEVELOPMENT OASIS INTERNATIONAL IS A NON-PROFIT, 501(C) (3), ORGANIZATION SERVING THE AFRICAN IMMIGRANT COMMUNITY AND THE LOW-INCOME NEIGHBORHOOD OF WEST END, ELMWOOD, UPPER SOUTHWEST PROVIDENCE, LOWER SOUTHWEST PROVIDENCE, AND WASHINGTON PARK. OASIS INTERNATIONAL STARTED IN 1992, AS AN EFFORT TO IDENTIFY AND

MAINTAIN AN INFRASTRUCTURE FOR PROFESSIONAL DEVELOPMENT FOR ITS MEMBERS. THROUGH THE EXCHANGE OF TECHNICAL INFORMATION, GENERAL BUSINESS ASSISTANCE, AND THE PROMOTION OF CULTURAL ACTIVITIES, WE HAVE EVOLVED OF A NON-PROFIT ORGANIZATION DEDICATED TO LONG-TERM SOCIAL EXCHANGE, CULTURAL AND ECONOMIC DEVELOPMENT IN OUR NEIGHBORHOODS. WE ARE ACUTELY AWARE OF THE LIMITATIONS TO CAPITAL AND THE ABSENCE OF ECONOMIC DEVELOPMENT WITHIN OUR COMMUNITY. THESE LIMITATIONS ARE PARTICULARLY GLARING AMONG THE RECENT IMMIGRANTS AND THE LOW-INCOME THAT ARE SIGNIFICANT PORTIONS OF OUR POPULATION.

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
TREASURER	BODE OMISORE	150 MELROSE ST PROV, RI 02907 USA
SECRETARY	VICTOR ADEWUSI	94 VINE ST PROVIDENCE, RI 02914 USA
CEO	MURAINA MORRIS AKINFOLARIN	270 PRAIRIE AVE PROVIDENCE. RI PROVIDENCE, RI 02905 USA
OTHER OFFICER	MORRIS AKINFOLARIN RI	
VICE PRESIDENT	NKOLI ONYE	903 PROVIDENCE PLACE PROVIDENCE, RI 02903 USA
PRESIDENT	HAROLD OMISORE	213 SACKETT STREET PROVIDENCE, RI 02907- USA
DIRECTOR	MURAINA AKINFOLARIN	270 PRAIRIE AVE PROVIDENCE, RI 02905 USA
DIRECTOR	MIKE WREH	102 CORNWALL ST PROVIDENCE, RI 02908 USA
DIRECTOR	FLORA OLADAPO	94 KIMBALL ST, PROVIDENCE, RI 02908 USA
DIRECTOR	AFUA AKOTO	1 LAKESIDE AVE CRANSTON, RI 02910 USA
DIRECTOR	ALEX DANSO	104 GARDEN ST PAWTUCKET, RI 02860 USA
DIRECTOR	ROCHELLE LEE	172 ONTARIO ST PROVIDENCE, RI 02907 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**

MURAINA AKINFOLARIN 600 BROAD ST P.O.BOX 27774 PROVIDENCE , RI 02907

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

Signed this 1 Day of March, 2024 at 11:26:53 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 MURAINA AKINFOLARIN
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2024 State of Rhode Island
All Rights Reserved