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**State of Rhode Island  
Department of State - Business Services Division**

**Annual Report for the year:** 2024  
**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 <b>799578</b>		2. Exact name of the Corporation <b>Liberra Public Radio</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Radio is an online media that helps to provide unity, public health awareness among diaspora Liberians / Community</b>			
4. NAICS Code <b>813319</b>		6. Principal Office Address <b>Apt #2, 46 Rhodes Street</b>		City <b>Pawtucket</b>	State <b>RI</b>
				Zip <b>02860</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Aphonso Jean Sue</b>			Vice-President Name <b>Samson Brown TDe</b>		
Street Address <b>46 Rhodes Street Apt. 2</b>			Street Address <b>5530 Jonesboro Way</b>		
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	City <b>Sacramento</b>	State <b>CA</b>	Zip <b>95835</b>
Secretary Name <b>Jalyah M. Jalame</b>			Treasurer Name		
Street Address <b>2122 Rand Place NE</b>			Street Address		
City <b>Washington</b>	State <b>DC</b>	Zip <b>20002</b>	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Aphonso Jean Sue</b>			Director Name <b>Samson Brown TDe</b>		
Street Address <b>46 Rhode Street Apt. 2</b>			Street Address <b>5530 Jonesboro Way</b>		
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	City <b>Sacramento</b>	State <b>CA</b>	Zip <b>95835</b>
Director Name <b>Jalyah M. Jalame</b>			Director Name		
Street Address <b>2122 Rand Place NE</b>			Street Address		
City <b>Washington</b>	State <b>DC</b>	Zip <b>20002</b>	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<i>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.</i>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Aphonso Jean Sue</b>					Date <b>7/18/2024</b>
Signature of Officer/Authorized Representative <i>[Signature]</i>					

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

**FILED**

**JUL 18 2024**

**BY 4PV1Y**

**KS**

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FORM 631 - Revised 04/2023