



**State of Rhode Island
Office of the Secretary of State**

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Domestic Non-Profit
Annual Report - Amended**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), 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.

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2024

1. Corporate ID No. 001764467

2. Name of Corporation Bale Parvaaz Organization

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

611519

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 106 WELFARE AVE

City or Town: CRANSTON

State: RI

Zip: 02910

Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROVIDE EDUCATION TO YOUNG WOMEN AND GIRLS IN AFGHANISTAN BY SECURING DONATIONS LOCALLY IN RI.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3).
R.I.G.L.
7-6-23**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	KHADIJA NAZARI	BROOK STREET PROVIDENCE, RI 02912 USA
DIRECTOR	SUSAN M JORDAN	32 QUIET WAY WAKEFIELD, RI 02879 USA
DIRECTOR	ANNE SLINEY	106 WELFARE AVE CRANSTON, RI 02910 USA
DIRECTOR	JAN SHAPIN	BLACKSTONE BLVD PROVIDENCE, RI 02906 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

SUSAN M. JORDAN 32 QUIET WAY WAKEFIELD , RI 02879

Signed this 9 Day of August, 2024 at 2:57:00 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 ANNE SLINEY
Signature of Authorized Person

Form No. 631
Revised 09/07

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State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

August 09, 2024 02:56 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

