| State of Rhode Island Fee: \$20.0 Office of the Secretary of State |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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 2025: 2025 |
| 1. Corporate ID No. 000026670 |
| 2. Name of Corporation Arabic Educational Foundation |
| 3. State of Incorporation |
| State: <u>RI</u> |
| 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 <u>click here.</u> |
| NAICS Code |
| <u>813211</u> |
| 4. Principal Office Address |
| No. and Street: <u>650 GEORGE WASHINGTON HWY</u> SUITE 200 |
| City or Town:LINCOLNState: RIZip: 02865Country: USA |
| 5. Brief Description of the Character of the Affairs Conducted in Rhode Island |
| |
| PROVIDE SCHOLARSHIPS TO STUDENTS OF ACCREDITED INSTITUTIONS OF HIGHER LEARNING |
| 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 |
|----------------|------------------------------------------------|------------------------------------------------------------|
| PRESIDENT | SHARON DESIMONE | 80 ROCK RIDGE ROAD LINCOLN, RI 02865 USA |
| TREASURER | FADIA KHOURY KABAK | 86 NAPOLEON STREET WOONSOCKET, RI 02985 USA |
| DIRECTOR | RACHEL BRIDEN | 40 BROWN STREET N. PROVIDENCE, RI 02911 USA |
| DIRECTOR | BAHJAT KHOURY | 148 BRYANT STREET CUMBERLAND, RI 02864 USA |
| DIRECTOR | ALEXANDER AZAR | 1069 GREAT ROAD LINCOLN, RI 02865 USA |
| DIRECTOR | MARIA DAIKH | 1121 DIAMOND HILL ROAD WOONSOCKET, RI 02895 USA |
| DIRECTOR | MARLENE SAMRA MARSHALL | 4 ARMAS COURT CUMBERLAND, RI 02864 USA |
| DIRECTOR | DONNA M RAHEB | 1 DOWNS DR LINCOLN, RI 02865 USA |
| VICE PRESIDENT | DONNA M RAHEB | 1 DOWNS DR LINCOLN, RI 02865 USA |
| DIRECTOR | SHARON DESIMONE | 80 ROCK RIDGE ROAD LINCOLN, RI 02865 USA |
| DIRECTOR | YOLANDA HADDAD | 257 OLD RIVER ROAD LINCOLN, RI 02865 USA |
| DIRECTOR | MIRELLE WEBBE | 702 SMITHFIELD ROAD NORTH PROVIDENCE, RI 02904 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

JOSEPH RAHEB, ESQ. 650 GEORGE WASHINGTON HIGHWAY, SUITE 201 LINCOLN , RI 02865

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

Signed this 24 Day of April, 2025 at 11:30:51 AM 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 JOSEPH RAHEB

Signature of Authorized Person

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