	State of Rhode Office of the Secret		Fee: \$20.00	
	Division Of Busine	ss Services		
	148 W. River	Street		
	Providence RI 029			
1636	(401) 222-30	040		
Foreign Non-Profit				
Annual Report				
Filing Period: February 1 - May	1			
In accordance with R.I.G.L. 7-0 annual report within the time p penalty fee of \$25.00.				
ANNUAL REPORT YEAR - EN	TER THE CURRENT YEAR 2	2 <b>024</b> : <u>2024</u>		
1. Corporate ID No. <u>0001</u>	<u>65049</u>			
2. Name of Corporation <u>ARM</u>	MENIAN CULTURAL AS	SOCIATION OF AN	MERICA, INC.	
3. State of Incorporation				
State: <u>MA</u>				
	NAICS CODE			
Using the dropdown labeled N primary type of activity in whi populate a NAICS Code base box on the right. For further as	ch your entity engages. The d on the chosen selection. If	box to the right of the the NAICS Code is k	e dropdown will	
NAICS Code				
813319				
4. Principal Office Address				
No. and Street: 7 ARMI				
	ENIA STREET	a, DI 7:a, 02000	Country USA	
City or Town: <u>PROVII</u>	<u>JENCE</u> Stati	e: <u>RI</u> Zip: <u>02909</u>	Country: <u>USA</u>	
5. Brief Description of the Ch	aracter of the Affairs Cond	ucted in Rhode Islan	d	
	T NEEDV AND IMDOVE			
<u>TO ASSIST AND SUPPORT NEEDY AND IMPOVERISHED PEOPLE OF ARMENIAN</u> <u>ORIGIN</u>				
6. Names and Addresses of	the Officers and Directors:			
All officers and directors n	nust be listed.			
Title	Individual Name First, Middle, Last, Suffix		Iress State, Zip Code, Country	
1				

PRESIDENT	ANI TCHAGHLASIAN	233 MILLER ROAD MAHWAH, NJ 07430 USA	
TREASURER	STEVE MESROBIAN	1 BUCKLEY DRIVE FOXBORO, MA 02035 USA	
SECRETARY	GEORGE AGHJAYAN	5 SHORE AVE WESTMINSTER, MA 01473 USA	
DIRECTOR	MARAL ABRAHAMIAN	80 BIGELOW AVE WATERTOWN, MA 02472 USA	
DIRECTOR	HARRY GLORIKIAN	80 BIGELOW AVE WATERTOWN, MA 02472 USA	
DIRECTOR	SEVAG SHIROZIAN	80 BIGELOW AVE WATERTOWN, MA 02472 USA	
DIRECTOR	GEORGI OSHAGAN	80 BIGELOW AVE WATERTOWN, MA 02472 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

JOHN MKRTSCHJAN 7 ARMENIA STREET PROVIDENCE , RI 02909

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

## Signed this 3 Day of February, 2024 at 10:48:44 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 HRANT KHATCHADOURIAN

Signature of Authorized Person

Form No. 631 Revised 09/07

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