Trustees' Annual Report for the period

From	Period start date			To	Period end date		
	Day 01	04	2025		31	08	2026

Section A Reference and administration details

Charity name	THE ORPHANS OF PARADISE FOUNDATION
Other names charity is known by	
Registered charity number (if any)	1200998
Charity's principal address	59 Taurus Close LEICESTER
Postcode	**LE2 0UL**

Names of the charity trustees who manage the charity

	Trustee name	Office (if any)	Dates acted if not for whole year	Name of person (or body) entitled to appoint trustee (if any)
1	ABDIRIZAK ABDALLA MOHAMUD			
2	SHAYKH ABDALLA MOHAMED MAHAMUD			
3	SULEYMAN OMAR SALAAD			
4				
5				
6				
7				
8				
9				
10				

Names of the trustees for the charity, if any, (for example, any custodian trustees)

Name	Dates acted if not for whole year

Names and addresses of advisers (Optional information)

Type of adviser	Name	Address

Name of chief executive or names of senior staff members (Optional information)

Section B Structure, governance and management

Description of the charity's trusts

Type of governing document (eg. trust deed, constitution)	CONSTITUTION
How the charity is constituted (eg. trust, association, company)	CHARITABLE INCORPORATED ORGANISATION
Trustee selection methods (eg. appointed by, elected by)	Appointed by the majority of the trustees

Additional governance issues (Optional information)

You **may choose** to include additional information, where relevant, about:

- policies and procedures adopted for the induction and training of trustees;
- the charity's organisational structure and any wider network with which the charity works;
- relationship with any related parties;
- trustees' consideration of major risks and the system and procedures to manage them.

Section C Objectives and activities

Summary of the objects of the charity set out in its governing document

TO RELIEVE FINANCIAL HARDSHIP AMONG ORPHANS, POOR PEOPLE, VICTIMS OF NATURAL DISASTERS AND OTHER PEOPLE IN FINANCIAL HARDSHIP BY MEANS OF, BUT NOT EXCLUSIVELY, MAKING GRANTS FOR PROVIDING OR PAYING FOR ITEMS, EQUIPMENT, SERVICES AND FACILITIES, INCLUDING THE PROVISION OF FOOD, WATER AND COSTS FOR ATTENDING SCHOOLS FOR PUBLIC BENEFIT.

Summary of the main activities undertaken for the public benefit in relation to these objects (include within this section the statutory declaration that trustees have had regard to the guidance issued by the Charity Commission on public benefit)	The trustees continued to struggle without a bank account during this year. The trustees will now review the future of the charity's future and explore adding new trustees who can take the charity forward. The trustees have considered the general guidance on public benefit issued by the Charity Commission and has taken due regard of that guidance.

Additional details of objectives and activities (Optional information)

You **may choose** to include further statements, where relevant, about: • policy on grantmaking; • policy programme related investment; • contribution made by volunteers.	

Section D Achievements and performance

Summary of the main achievements of the charity during the year	The trustees continued to struggle without a bank account during this year. The trustees will now review the future of the charity's future and explore adding new trustees who can take the charity forward.

Section E Financial review

Brief statement of the charity's policy on reserves	The charity remained dormant during this extended 17 months period and hence had no income or expenditure for the year. There were no reserves held.
Details of any funds materially in deficit	

Further financial review details (Optional information)

You **may choose** to include additional information, where relevant about:

- the charity's principal sources of funds (including any fundraising);
- how expenditure has supported the key objectives of the charity;
- investment policy and objectives including any ethical investment policy adopted.

Section F Other optional information

Section G Declaration

The trustees declare that they have approved the trustees' report above.

Signed on behalf of the charity's trustees

Signature(s)	Abdi	
Full name(s)	ABDIRIZAK ABDALLA MOHAMUD	
Position (eg Secretary, Chair, etc)	Chair	
Date	13/09/2026	

CHARITY COMMISSION FOR ENGLAND AND WALES

Charity Name	No (if any)
THE ORPHANS OF PARADISE FOUNDATION	1200998

Receipts and payments accounts

CC16a

For the period from	Period start date	To	Period end date
	01/04/2025		31/08/2026

Section A Receipts and payments

	Unrestricted funds	Restricted funds	Endowment funds	Total funds	Last year
	to the nearest £	to the nearest £	to the nearest £	to the nearest £	to the nearest £
A1 Receipts					
Donations	O	O	O	O	O
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
Sub total *(Gross income for AR)*	-	-	-	-	-
A2 Asset and investment sales, (see table).					
	-	-	-	-	
	-	-	-	-	
Sub total	-	-	-	-	-
Total receipts	O	O	O	O	O
A3 Payments					
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
Sub total	-	-	-	-	-
A4 Asset and investment purchases, (see table)					
	-	-	-	-	-
	-				-
	-	-	-	-	-
Sub total	-	-	-	-	-
Total payments	O	O	O	O	O
Net of receipts/(payments)	O	O	O	O	O
A5 Transfers between funds	-	-	-	-	-
A6 Cash funds last year end	-	-	-	-	-
Cash funds this year end	O	O	O	O	O

Section B Statement of assets and liabilities at the end of the period

Categories	Details	Unrestricted funds to nearest £	Restricted funds to nearest £	Endowment funds to nearest £
B1 Cash funds	Cash at bank		-	-
		-	-	-
		-	-	-
	Total cash funds	-	-	-
	(agree balances with receipts and payments account(s))	OK	OK	OK

	Details	Unrestricted funds to nearest £	Restricted funds to nearest £	Endowment funds to nearest £
B2 Other monetary assets		-	-	-
		-	-	-
		-	-	-
		-	-	-
		-	-	-
		-	-	-

	Details	Fund to which asset belongs	Cost (optional)	Current value (optional)
B3 Investment assets			-	-
			-	-
			-	-
			-	-
			-	-

	Details	Fund to which asset belongs	Cost (optional)	Current value (optional)
B4 Assets retained for the charity's own use			-	-
			-	-
			-	-
			-	-
			-	-
			-	-
			-	-
			-	-
			-	-

	Details	Fund to which liability relates	Amount due (optional)	When due (optional)
B5 Liabilities				
			-	
			-	

Signed by one or two trustees on behalf of all the trustees	Signature	Print Name	Date of approval
	Abdi	ABDIRIZAK ABDALLA MOHAMUD	13/09/2026