



**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007**

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 \* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK  
 \* 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.

1. Corporate ID No. 156827		2. Name of Corporation La Alianza Pro La Salud Del Hispano (the alliance pro Hispanic Health)	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 1099 Broad St.	
		City PROV	State RI
		Zip 02907	
5. Foreign corporation. Enter principal office address		City	State
		Zip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island - the purpose of this organization is to help, guide, support, promote, advocate and provide direct services and referral to the Hispanic/Latino adult, elderly and person with disabilities.			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Maria Matias		Vice President Name Lourdes V. Richards	
Street Address 26 Earl Street Apt A.		Street Address 387 George Arden Ave	
City West Warwick	State RI	City Warwick	State RI
Zip 02886		Zip 02886	
Secretary Name Luis Jusino		Treasurer Name Maximo Zapata	
Street Address 25 Victoria St.		Street Address 77 Leigh Street	
City PROV	State RI	City Warwick	State RI
Zip 02904		Zip 02889	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name Maria Matias		Director Name Luis Jusino	
Street Address 26 Earl St. Apt A		Street Address 25 Victoria St.	
City West Warwick	State RI	City N. PROV.	State RI
Zip 02893		Zip 02904	
Director Name Lourdes V. Richards		Director Name Esperanza Gomez	
Street Address 387 George Arden Ave		Street Address 1000 Providence place Mall apt 108	
City Warwick	State RI	City prov	State RI
Zip 02886		Zip 02903	
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 R.I.G.L. 7-6-13 / 7-6-78			
Agent Name Maria Matias		Address	
Address 1099 Broad St.		City PROV	State RI
		Zip 02907	

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

Signature of Officer: *Lourdes V. Richards* Date: 8/8/08  
 Print or Type Name of Officer: Lourdes V. Richards  
 Title of Officer: Vice President

File Date: \_\_\_\_\_  
 Check No.: \_\_\_\_\_  
 By: \_\_\_\_\_  
**FILED**  
**AUG 08 2008**  
 FOR SECRETARY OF STATE USE ONLY