

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

401.22

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.I. 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 subj

to a penalty fee of \$25.00.			.g. 15 file 115 timbula report with	m me ume prescribeu	vy mw (n.i.g.l. /-0-91) is subject		
1. Corporate ID No.	Name of Corporation     International Alliance Church of the Christian amd Missionary Alliance Inc.						
26912							
3. State of Incorporation	1 '	s in Rhode Island - Street A	Address	City	Zip		
RI	184 Early Stre	eet		Providenc	e 02907		
5. Foreign corporation. Enter prin	ncipal office address		City:	State	Zip		
6. Brief Description of the character	of the affairs which a	re actually conducted in Ri	bode Island				
Faithbased, religious orgar	ization. The tead	ching and preaching	of the Word of God and weel	kly fellowship.			
				,			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR AT President Name			1				
Pastor Reth Nhar			Vice President Name Chen Nhar				
Street Address			Street Address				
37 Bailey Street				303 Killingly Street			
City	State	Zip	City	State	Zip		
Cranston	RI	02920	Providence	RI	02909		
Secretary Name			Treasurer Name				
Roth Nhar			Chantry Kue	Chantry Kue			
Street Address 37 Bailey Street			Street Address 95 Preston Street				
City	State	Zip	Gin;	State	Zip		
Cranston	RI	02920	Cranston	RI	02910		
			ATTACHMENT) TILL IN SPA	ACES BEFORE USING	ATTACHMENTS		
					THREE (3). R.I.G.L. 7-6-23		
Director Name			Director Name				
Samol Dy			Neary Huy				
Street Address			Street Address				
62 Bailey Street			44 Bailey Street				
City	State	Zip	City	State	Zip		
Cranston	RI	02920	Cranston	RI	02920		
Director Name				Director Name			
Laneth Sophalay							
Street Address			Street Address				
594 Public Street	Chart	[st.					
Providence	State RI	<sup>Ζιρ</sup> 02907	City	State	Zip		
			Changes require filing of Fo	) 0mm 641 DICI 7	6 12 / 7 6 79		
Agent Name	ODE ISLAND	DO HOT ADIEM - V	Address	orm OTI - R.I.G.L. /	·0·13 / /·0·/0		
Reth Nhar			Zuuress		·		
Address	**		City		ip		
37 Bailey Street			Cranston	02920			
				t			
This report must	be signed by eith	er the President, Vico	President, Secretary, Assistan	nt Secretary, Treasure	r, Receiver or Trustee		

2 6 9 1 2		Under penalty of perjury, I declare and aff report, including any accompanying schedu	
File DateFILED Check NoMAR 2 4 2009	41:11#8 #25	statements contained herein are true and co	
FOR SECRETARY OF STATE USE ONLY	3	Secretary Title of Officer	Form 631 Rev. 12/06