

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 _2009

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.

permitty fee of white.					
1. Corporate 1D No.	2. Name of Corp	oration			
31138	CRANSTON PORTUGUESE CLUB				
3. State of Incorporation	4. Corporate ada	lress in Rhode Island - Street Ad	ldress	City	Zip
RI	20 Secon	d Ave		Cranston	02910
5. Foreign corporation. Enter	principal office addres	s	City	State	Zip
6. Brief Description of the charac	cter of the affairs whic	h are actually conducted in Rho	de Island		
Social and Cultural Clu	b				
7. NAMES AND ADDRES	SES OF THE OFF	ICERS: ("X" BOX FOR AT	TACHMENT) 🔲 FILL IN SPA	CES BEFORE USING ATT	ACHMENTS
President Name			Vice President Name		
Manuel Lourenco			Antonio Pexia		
Street Address			Street Address		
56 Carman Street			308 Heather Street		
City	State	Zip	City	State	Zip
Cranston	RI	02910	Cranston	RI	02920
Secretary Name			Treasurer Name		
Carlos Simao			Antonio A. Dias		
Street Address			Street Address		
86 Lake View Road			407 Doric Avenue		
City	State	Zip	City	State	Zip
Cranston	RI	02920	Cranston	RI	02910
8. NAMES AND ADDRES	SES OF THE DIR	ECTORS: ("X" BOX FOR A	I <i>ttachment</i>) [[] fill in spa	ACES BEFORE USING AT	TACHMENTS
THE NUMBER OF DIRE	CTORS OF A DO	MESTIC (RHODE ISLAN	D) CORPORATION SHALL	NOT BE LESS THAN TH	REE (3). R.I.G.L. 7-6-23
Director Name			Director Name		
Jorge G. Fino			Jorge D. Cabral		
Street Address			Street Address		
25 Barney Street			147 Laurens Street		
City	State	Ζip	City	State	Zip
Rumford	Ri	02910	Cranston	l RI	02910
Director Name			Director Name		
Jose R. Vasco					
Street Address			Street Address		
195 Magnolia Stree	et				
City	State	Zip	City	State	Zip
Cranston	RI	02910			
9. REGISTERED AGENT	•	•		1	•
This information is curren	tly of record in the	e Office of the Secretary of	State. Changes require filing	of Form 641 - R.I.G.L. 7-6	-13/7-6-78
This report n	nust be signed by	either the President, Vice	President, Secretary, Assista	ant Secretary, Treasurer, R	teceiver or Trustee

	Under penalty of perjury, I declare and affirm that I have examined this
FILED	report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
JUN 02 2009	Signature of Officer Signature of Officer Date
By By	Antonio A. Dias Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	Treasurer Title of Officer

31130