



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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.

1. Corporate ID No. 000053209		2. Name of Corporation QUISQUEYA IN ACTION	
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 807 BROAD ST		City PROV
5. Foreign corporation. Enter principal office address P.O. BOX 72770 PROV. RI 02907		State RI	Zip 02907
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Preserve the Dominican culture and offer opportunities for college access			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name MARILYN SANCHEZ		Vice President Name HUASCAR BEATO	
Street Address 25 POTTER DR		Street Address 152 GALLUP ST	
City PROV	State RI	City PROV	State RI
Zip 02907		Zip 02905	
Secretary Name YOVANA GARCIA		Treasurer Name NANCY CEPEDA	
Street Address 99 MITCHELL ST		Street Address 708 DYER AVE	
City PROV	State RI	City CRANSTON	State RI
Zip 02907		Zip 02920	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ 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 MARILYN SANCHEZ		Director Name HUASCAR BEATO	
Street Address 25 POTTER DR		Street Address 152 GALLUP ST	
City PROV	State RI	City PROV	State RI
Zip 02907		Zip 02905	
Director Name YOVANA GARCIA		Director Name NANCY CEPEDA	
Street Address 99 MITCHELL ST		Street Address 708 DYER AVE	
City PROV	State RI	City CRANSTON	State RI
Zip 02907		Zip 02920	
9. REGISTERED AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78			

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

FILED

File Date
FEB 28 2011

Check No.
138574

BY
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STATE OF RHODE ISLAND
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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
MARILYN SANCHEZ

Date
8/27/11

Print or Type Name of Officer
President

Title of Officer