



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 2011

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. 530444		2. Name of Corporation AMIGOS DOS CEDROS (FRIENDS OF CEDROS)			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 14 SHERMAN AVENUE		City BRISTOL	Zip 02809
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 DEVELOPING, BUILDING, AND PROMOTING ACULTURAL BRIDGE BETWEEN PEOPLE OF CEDROS AND THEIR FAMILIES AND FRIENDS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JOSE D. DAROSA			Vice President Name		
Street Address 14 SHERMAN AVENUE			Street Address		
City BRISTOL	State RI	Zip 02809	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 * MANUEL LAERDA			Director Name * LIONEL E. VIEIRA		
Street Address 17 HEATH ST.			Street Address 40 SHERMAN AVE.		
City EAST PROVIDENCE	State R.I.	Zip 02915	City SEKONK	State MA	Zip 02771
Director Name * JOSE F. DAROSA			Director Name		
Street Address 386 WOODHAVEN ROAD			Street Address		
City PROV.	State R.I.	Zip 02861	City	State	Zip
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

530444

FILED	
File Date	JUN 29 2011
Check No.	147484
By	BY SECRETARY OF STATE USE ONLY

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.

JOSE D. DAROSA 6-13-11
Signature of Officer Date
JOSE D. DAROSA
Print or Type Name of Officer
PRESIDENT
Title of Officer