



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

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Certificate Request Form

Request Information (*Entity Name is only required for a Certificate of Non-Existence*)

ID	ENTITY NAME	CERTIFICATE TYPE
000722184	The Salgi Esophageal Cancer Research Foundation	Letter of Status / Legal Existence

Total Fee: \$107.00

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: CHRISTINA ABATECOLA

Business Name: THE SALGI ESOPHAGEAL CANCER RESEARCH FOUNDATION

No. and Street: 46 VILLAGE COURT

City or Town: WEST WARWICK

State: RI Zip: 02893 Count

Contact Phone: (401) 525-1534 ext:

Contact Email: CMA8709@YAHOO.COM

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason email address is provided, we will respond by mail.