



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

**Fee: \$20.00**

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

**Non-Profit Corporation  
Annual Report**

*Filing Period: June 1 - June 30*

*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.*

**ANNUAL REPORT YEAR:** 2012

**1. Corporate ID No.** 000713825

**2. Name of Corporation** Bridge To Hope International

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 37 SIBLEY STREET

City or Town: PROVIDENCE State: RI Zip: 02907 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: PROVIDENCE State: RI Zip: 02907 Country: UNI

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO SERVE AS AN ADVISOR

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	YANIA MARCELINO	90 LINWOOD STREET PROVIDENCE, RI 02909 USA
TREASURER	SOCORRO VARGAS	80 DIXON STREET PROVIDENCE, RI 02907 USA
VICE PRESIDENT	VIVIAN MORENO	37 SIBLEY STREET PROVIDENCE, RI 02907 USA
DIRECTOR	VIVIAN MORENO	37 SIBLEY STREET PROVIDENCE, RI 02907 USA
DIRECTOR	YANIA MARCELINO	90 LINWOOD STREET PROVIDENCE, RI 02909 USA
DIRECTOR	SOCORRO VARGAS	80 DIXON STREET PROVIDENCE, RI 02907 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

FIOR D VINAS 78 DIXON STREET PROVIDENCE , RI 02907

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

**Signed this 5 Day of August, 2012 at 12:08:35 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By VIVIAN MORENO  
Signature of Officer of the Corporation

☐ President or ☒ Vice President or ☐ Secretary or ☐ Assistant Secretary or

☐ Treasurer or ☐ Receiver or ☐ Trustee (check one)

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.**

Form No. 631  
Revised 09/07