



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. 000515854

2. Name of Corporation The New England Ibero American Film Festival

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 300 CENTERVILLE ROAD
SUITE 330 WEST

City or Town: WARWICK State: RI Zip: 02886 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

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

TO SUPPORT AND PROVIDE AN OUTLET IN RELATION TO THE FILM INDUSTRY AND RELATED ARTS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
SECRETARY	CHRISTINE LIMONTE	PO BOX 4685 PROVIDENCE, RI 02912 USA
SECRETARY	CHRISTINE LIMONTE	BROWN UNIVERSITY, 75 WATERMAN ST. BOX 4685

DIRECTOR	LEONEL PEREZ	PROVIDENCE, RI 02912 USA 1750 LENOX AVENUE MIAMI BEACH, FL 33139 USA
DIRECTOR	CHRISTINE LIMONTE	BROWN UNIVERSITY, 75 WATERMAN ST, BOX 4685 PROVIDENCE, RI 02912 USA
DIRECTOR	JAIME JORGE	9536 MOUNTAIN LAKE DRIVE OLTEWAH, TN 37363 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**

EUNIS & ASSOCIATES CPA, INC 300 CENTREVILLE ROAD SUITE 330W WARWICK , RI 02886

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

Signed this 30 Day of November, 2012 at 3:42:17 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 LEONEL LIMONTE, MD
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

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