



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 Office of the Secretary of State - Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>310557</b>		2. Exact name of the Corporation <b>US COMMUNITY SERVICES, INC.</b>	
3. State of Incorporation <b>RHODE ISLAND</b>		4. Brief description of the character of business conducted in Rhode Island <b>Helping those in need with information on basic needs &amp; referring them to appropriate agencies</b>	
5. Principal office address <b>594 CRONSTON ST.</b>		City <b>PROVIDENCE</b>	State <b>R.I.</b>
		Zip <b>02907</b>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <b>FREDDY SEPULVEDA</b>		Vice-President Name <b>SAMUEL CRUZ</b>	
Street Address <b>50 BIRCH ST. APT. 606</b>		Street Address <b>SHADOM I APT. 514</b>	
City <b>CRONSTON</b>	State <b>R.I.</b>	City <b>WARRICH</b>	State <b>R.I.</b>
Zip <b>02920</b>		Zip <b>029</b>	
Secretary Name <b>DAVID NARAH BOEE</b>		Treasurer Name <b>ELOY A. MORA</b>	
Street Address <b>685 CRONSTON ST.</b>		Street Address	
City <b>PROVIDENCE</b>	State <b>R.I.</b>	City <b>PROVIDENCE</b>	State <b>R.I.</b>
Zip <b>02907</b>		Zip <b>02907</b>	
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <b>FREDDY SEPULVEDA</b>		Director Name <b>ELOY A. MORA</b>	
Street Address <b>50 BIRCH ST. APT. 606</b>		Street Address <b>23 WHITNEY ST.</b>	
City <b>CRONSTON</b>	State <b>R.I.</b>	City <b>PROVIDENCE</b>	State <b>R.I.</b>
Zip <b>02920</b>		Zip <b>02907</b>	
Director Name		Director Name <b>SAMUEL CRUZ</b>	
Street Address		Street Address <b>SHADOM I APT. 514</b>	
City	State	City <b>WARRICH</b>	State <b>R.I.</b>
	Zip	Zip <b>029</b>	
8. REGISTERED AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.			

JUL 15 PM 12:35  
 CORPORATIONS DIV  
 STATE

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

File Date

Check No

By:

FOR SECRETARY OF STATE USE ONLY

12:38 pm

**FILED**

JUL 15 2014

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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 or Authorized Representative

Date

Print or Type Name of Officer or Authorized Representative