



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:** 2014

**1. Corporate ID No.** 000424966

**2. Name of Corporation** Iglesia Casa de Esperanza = Church House of Hope=

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 383 ARNOLD STREET

City or Town: WOONSOCKET

State: RI Zip: 02895 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**

WORSHIP, COMMUNITY CHURCH, PREACHING THE GOSPEL

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
PRESIDENT	AXEL RAMOS	569 PARK AVENUE WOONSOCKET, RI 02895 USA
VICE PRESIDENT	JAMILA RAMOS	569 PARK AVENUE WOONSOCKET, RI 02895 USA
DIRECTOR	EDWIN ALVAREZ	48 EDGEWOOD AVENUE

		WOONSOCKET, RI 02895 USA
DIRECTOR	JOSE A. BERRIOS	383 ARNOLD STREET WOONSOCKET, RI 02895 USA
TREASURER	CARMEN JIMENEZ	79 ROCK RIDGE DRIVE #C WOONSOCKET, RI 02895 USA
SECRETARY	MARIA M TORO	2397 MENDON ROAD WOONSOCKET, RI 02895 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**

JOSE BERRIOS 383 ARNOLD STREET WOONSOCKET , RI 02895

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

**Signed this 28 Day of July, 2014 at 6:51:20 PM by the authorized person. *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 company, 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 AXEL RAMOS  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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