



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 **2012**

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. 000131444		2. Exact name of the Corporation Developing & Empowering Latinos In America			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To provide information, education and support services to Latinos and Immigrants , to ease their transition into American society and serve as resource to the community at large			
5. Principal office address 807 Broad Stree			City Providence	State RI	Zip 02907
6. LIST OFFICERS (NAME AND ADDRESS) (SEE 'X' BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Delia Rodriguez-Masjoan			Vice-President Name Adelaida Sanchez		
Street Address 25 Devereux Street			Street Address 54 Wendell Street		
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02907
Secretary Name Manuela Raposo			Treasurer Name Sandra Lake		
Street Address 56 Melrose Street			Street Address P.O. Box 73255		
City Cranston	State RI	Zip 02910	City Providence	State RI	Zip 02907
7. LIST ALL DIRECTORS (NAME AND ADDRESS). RHODE ISLAND CORPORATIONS MUST HAVE NO LESS THAN THREE (3) DIRECTORS (SEE 'X' BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name DELIA RODRIGUEZ MASJOAN			Director Name ADELAI DA SANC EZ		
Street Address - SAME -			Street Address - SAME -		
City Providence	State RI	Zip 02901	City	State	Zip
Director Name MANUELA RAPOS O			Director Name SANDRA LAKE		
Street Address - SAME -			Street Address - SAME -		
City	State	Zip	City	State	Zip
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.					

2015 MAR 19 AM 11:08
 SECRETARY OF STATE
 CORPORATIONS DIV

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



FILED
 MAR 19 2015

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.

03/18/2015
 Date

Signature of Officer or Authorized Representative

Delia Rodriguez-Masjoan
 Print or Type Name of Officer or Authorized Representative