



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:** 2015

**1. Corporate ID No.** 000514898

**2. Name of Corporation** Pumas Soccer Association, Inc.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 132 BEACHMONT AVE

City or Town: CRANSTON

State: RI

Zip: 02905

Country: USA

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

No. and Street: 132 BEACHMONT AVE

City or Town: CRANSTON

State: RI

Zip: 02905

Country: UNI

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

TO PROMOTE YOUTH SOCCER ACTIVITIES IN RI

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	LUIS CASTANOS	132 BEACHMONT AVENUE CRANSTON, RI 02905 USA
OTHER OFFICER	LUIS CASTANOS	132 BEACHMONT AVE CRANSTON, RI 02905 UNI
DIRECTOR	AZELARDO HERNANDEZ	MANTON AVENUE

DIRECTOR	LUCIO DA SYLVA	PROVIDENCE, RI 02905 USA 53 SUSSEY STREET PROVIDENCE, RI 02902 USA
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**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**

LUIS CASTANOS 132 BEACHMONT AVENUE CRANSTON , RI 02905

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

*Signed this 1 Day of September, 2015 at 3:22:40 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 LUIS CASTANOS  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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