



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: 2016

1. Corporate ID No. 000118179

2. Name of Corporation Sunshine National & Int'l Chaplain Ministry Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 327 DEXTER STREET

City or Town: PROVIDENCE

State: RI

Zip: 02907

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

TAKE CARE OF THE ORPHANS, NEEDY CHILDREN AND ELDERLY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	SUNSHINE POWER	38 WILLIAM ELLERY PL. PROVIDENCE, RI 02904 USA
TREASURER	PIERRE NEPTUNE	1035 UNION STREET BROOKLYN, NY 11225 USA
SECRETARY	ANEKTA DREZEK	2030 PALMETTO STREET

		RIDGEWOOD, NY 11385 USA
VICE PRESIDENT	MASHA PAUL	108 DOYLE AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	MASHA PAUL	108 DOYLE AVE PROVIDENCE, RI 02906 USA
DIRECTOR	ANEKTA DREZEK	2030 PALMETTO STREET RIDGEWOOD, NY 11385 USA
DIRECTOR	KENOL TORCHON	327 DEXTER STREET PROVIDENCE, RI 02907 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**

EMMANUELA PAUL TORCHON 108 DOYLE AVENUE, SUITE 22 PROVIDENCE , RI 02906

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

Signed this 14 Day of June, 2016 at 1:24:47 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 SUNSHINE POWER
Signature of Authorized Person

Form No. 631
Revised 09/07

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