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. 000508820

2. Name of Corporation TABERNACULO NUEVA ATMOSFERA DE GLORIA INC

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 144 DELAINE STREET
City or Town: PROVIDENCE State: RI Zip: 02909 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

TO PREACH AND TEACH THE FULL GOSPEL OF JESUS CHRIST

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	CARLOS L PEREZ	144 DELAINE STREET PROVIDENCE, RI 02909 USA
VICE PRESIDENT	JOE L BIAGGI	81 HALL ST APT 2 PROVIDENCE, RI 02904 US
TREASURER	PEDRO ROBLES	24 SUNSET HILL

		FALL RIVER , MA 02724 USA
SECRETARY	MARITZA CRUZ COLON	28 MOREFIELD ST PROVIDENCE, RI 02909 USA
DIRECTOR	CARMINA SOSA	518 BRANCH AVE 2ND FLOOR PROVIDENCE, RI 02904 USA
DIRECTOR	LUZ H BIAGGI	81 HILL ST APT 2 PROVIDENCE, RI 02904 US
DIRECTOR	ALVARO MARTINEZ	176 REGENT AVENUE PROVIDENCE, RI 02908 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

CARLOS L. PEREZ 144 DELAINE STREET PROVIDENCE , RI 02909

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

Signed this 17 Day of June, 2016 at 4:15:53 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 CARLOS L PEREZ
Signature of Authorized Person

Form No. 631
Revised 09/07

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