



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. 000133088

2. Name of Corporation Mountain of Fire and Miracles Ministries, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 745 NORTH BORADWAY

City or Town: EAST PROVIDENCE

State: RI Zip: 02914 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 CREATE, ESTABLISH AND OPERATE A CHURCH

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MATTHEW OLUSEGUN AWOLEYE	81 ARTHUR STREET, APT. 11 PAWTUCKET, RI 02860 USA
SECRETARY	AMOS ABIODUN ADELAIYE	54 AVENTINE ST PROVIDENCE, RI 02904 USA
DIRECTOR	TOLULOPE OSHINKANLU	44 QUAKER DRIVE

		WEST WARWICK, RI 02893 USA
DIRECTOR	FRANK EYESTEMITAN	8 OLD JENCKES HILL ROAD LINCOLN, RI 02865 USA
DIRECTOR	IYABODE OLADIPO	37 NAGLON PAWTUCKET, RI 02860 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

DR. DANIEL K. OLVKOYA 745 NORTH BROADWAY EAST PROVIDENCE , RI 02914

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

Signed this 29 Day of June, 2016 at 1:35:08 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 AMOS ADELAIYE
Signature of Authorized Person

Form No. 631
Revised 09/07