



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. 000553653

2. Name of Corporation Iglesia Aliento de Vida

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 85 INDUSTRIAL CIRCLE
UNIT 4101

City or Town: LINCOLN

State: RI Zip: 02865 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

RELIGIOUS NON-PROFIT CHRISTIAN CHURCH FOR THE COMMUNITY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	PASTOR RICHARD MARTINEZ	136 FOURTH AVENUE - APT E302 WOOSOCKET, RI 02895 USA
TREASURER	LIZBETH CALO MACHICOTE	1264 SMITH STREET PROVIDENCE, RI 02908 USA

DIRECTOR	CARMEN L SANCHEZ	212 GLOBE STREET 2FLR EAST FALL RIVER, MA 02724 USA
DIRECTOR	RICHARD MARTINEZ	136 FOURTH AVENUE, APT E302 WOONSOCKET, RI 02895 USA
DIRECTOR	MARITZA MARTINEZ	136 FOURTH AVENUE, APT E302 WOONSOCKET, RI 02895 USA
DIRECTOR	JOEL CORREA	356 HAWKINS STREET PROVIDENCE, RI 02904 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

RICHARD MARTINEZ 1261 CHALKSTONE AVENUE PROVIDENCE , RI 02908

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 July, 2016 at 2:26:53 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 MARITZA MARTINEZ
Signature of Authorized Person

Form No. 631
Revised 09/07