



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: **2013**

## Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV

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1. Entity ID Number <b>30550</b>		2. Exact name of the Corporation <b>PORTUGUESE BENEFICIAL ASSOCIATION DON LUIZ FILIPE</b>			
3. State of Incorporation <b>RHODE ISLAND</b>		5. Brief description of the character of business conducted in Rhode Island <b>ASSISTS THE PORTUGUESE COMMUNITY IN ALL ASPECTS OF LIVING IN THE USA</b>			
4. NAICS Code <b>813319 - Other Social Advoc</b>					
6. Principal Office Address <b>9 ST. ELIZABETH STREET</b>			City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>CARLOS MEDEIROS</b>			Vice-President Name <b>VICTOR PARECE</b>		
Street Address <b>283 MARKET STREET</b>			Street Address <b>8 ST. ELIZABETH STREET</b>		
City <b>WARREN</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
Secretary Name <b>CHRISTINE MIMOSO</b>			Treasurer Name <b>VICTOR PARECE</b>		
Street Address <b>9 ST. ELIZABETH STREET</b>			Street Address <b>8 ST. ELIZABETH STREET</b>		
City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>JOSE TEIXEIRA</b>			Director Name <b>EMANUEL SOUSA</b>		
Street Address <b>9 ST. ELIZABETH STREET</b>			Street Address <b>9 ST. ELIZABETH STREET</b>		
City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
Director Name <b>ARMANDO PACHECO</b>			Director Name <b>MANUEL ALMEIDA</b>		
Street Address <b>9 ST. ELIZABETH STREET</b>			Street Address <b>9 ST. ELIZABETH STREET</b>		
City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>CARLOS MEDEIROS</b>					Date <b>6/29/17</b>
Signature of Officer/Authorized Representative <i>[Signature]</i>					

FILED

 MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

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BY **307422**

FORM 631 - Revised: 06/2017