



**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: 2017

1. Corporate ID No. 000793837

2. Name of Corporation Diversity & Inclusion Professionals, Inc.

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code
813319

4. Corporate Address in Rhode Island

No. and Street: C/O GLOBAL VIEW COMMUNICATIONS
163 EXCHANGE STREET, SUITE 303

City or Town: PAWTUCKET

State: RI Zip: 02860 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 ADVANCE THE FIELD OF DIVERSITY AND INCLUSION BY EDUCATING,
INFORMING AND NETWORKING IN A SUPPORTIVE ENVIRONMENT

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Incorporator is no longer applicable; please delete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
ASSISTANT SECRETARY	KAS R. DECARVALHO	317 IRON HORSE WAY, SUITE 301 PROVIDENCE, RI 02908 USA
DIRECTOR	LINDA NEWTON	45 LARCH STREET PROVIDENCE, RI 02906 USA
DIRECTOR	GREG ALMIEDA	5 HOODER STREET PROVIDENCE, RI 02908 USA
DIRECTOR	TRACY BARAC	52 VALLEY STREET #113 PROVIDENCE, RI 02909 USA
DIRECTOR	RAFAEL ZAPATA	1 CUNNINGHAM SQUARE PROVIDENCE, RI 02908 USA
DIRECTOR	RAMONA ROYAL	100 AMICA WAY LINCOLN, RI 02865 USA
DIRECTOR	STEPHANIE HUCKEL	500 EXCHANGE STREET PROVIDENCE, RI 02903 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

KAS R. DECARVALHO, ESQ. 1301 ATWOOD AVENUE, SUITE 215N NORTHWOODS OFFICE PARK
JOHNSTON , RI 02919

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

Signed this 18 Day of July, 2017 at 3:45:19 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 KAS R. DECARVALHO
Signature of Authorized Person

Form No. 631
Revised 09/07