



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

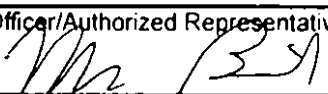
Annual Report for the year: **2017**

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.

1. Entity ID Number 929153		2. Exact name of the Corporation NORTH END YOUTH SPORTS, INC.			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island To instruct boys and girls in the fundamentals of football, cheerleading, good sportsmanship and team spirit			
4. NAICS Code 713990					
6. Principal Office Address 53 Ophelia Street			City Providence	State RI	Zip 02909
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Ariel Marmolejos			Vice-President Name None		
Street Address 56 Verndale Avenue			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Secretary Name Lekecia Cox			Treasurer Name Martor Biah		
Street Address 68 Manetta Street, Unit A			Street Address 53 Ophelia Street		
City Providence	State RI	Zip 02904	City Providence	State RI	Zip 02908
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐					
Director Name Ariel Marmolejos			Director Name Martor Biah		
Street Address 56 Verndale Avenue			Street Address 53 Ophelia Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02909
Director Name Lekecia Cox			Director Name		
Street Address 68 Manetta Street, Unit A			Street Address		
City Providence	State RI	Zip 02904	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
<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 Martor Biah				Date 2/23/18	
Signature of Officer/Authorized Representative 					

SIGN DOCUMENT HERE

FILED

MAR 02 2018
BY 