RI SOS Filing Number: 201869505880 Date: 7/2/2018 12:40:00 PM



State of Rhode Island and Providence Plantations Office of the Secretary of State

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: 2018

- **1. Corporate ID No.** 001657139
- 2. Name of Corporation PROVIDENCE MABUHAY MISSION (PMMI)
- 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 <u>click here.</u>

NAICS Code

6

Fee: \$20.00

813212

4. Corporate Address in Rhode Island

No. and Street: 21 QUINTON STREET

City or Town: $\underline{WARWICK}$ State: RI Zip: $\underline{02888}$ 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 HELP IN THE PROMOTION AND PROVISION OF ASSISTANCE IN THE HEALTH NEEDS OF THE UNDERSERVED

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 | Address |
|----------------|-----------------------------|---|
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
| PRESIDENT | RENATO A. REYES, MD | 12816 DESERT SKY AVENUE NE ALBUQUERQUE, MN 87111 USA |
| TREASURER | MARIA T. SOLIS | 5022 SHIRLEY DRIVE LA PALMA, CA 90623 USA |
| SECRETARY | MARIA ELENA S. PERUT | 144 BELLMAN AVENUE WARWICK, RI 02889 USA |
| VICE PRESIDENT | REMEDY M. MEDINA | 4942 HELLMAN AVENUE LOS ANGELES, CA 90042 USA |
| VICE PRESIDENT | VICENTE M. DE LIMA JR | 45 POLABAY SOUTHBAY GARDENS PARAÑAQUE CITY, PHL |
| DIRECTOR | ALMA B. SIANSON | 10721 DROXFORD STREET CERRITOS, CA 90703 USA |
| DIRECTOR | MARIA REMEDIOS CHUA- SY | 11 N. OSMUNDO ST, BF HOMES PH 2 DEPARO, NOVALICHES NORT QUEZON CITY, PHL |

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

CATHY THIBODEAU 21 QUINTON STREET WARWICK, RI 02888

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

Signed this 2 Day of July, 2018 at 12:41:44 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 MARIA ELENA S. PERUT Signature of Authorized Person

Form No. 631 Revised 09/07

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